

### Haematology and Transfusion

#### **UK NEQAS Haematology**

## SURVEY 2304DF: BLOOD FILM FOR MANUAL DIFFERENTIAL COUNT DISTRIBUTION DATE: 4th December 2023

CLOSING DATE: 23:59 (GMT); 17th December 2023

#### 1.0 Distribution Package

Distribution 23L includes the following surveys:

1. Full Blood Count 4. Abnormal Haemoglobins, Hb A2, Hb F & Hb S

2. Automated Differential Leucocyte Count 5. Blood Films for Morphology

3. Erythrocyte Sedimentation Rate 6. Manual Differential Leucocyte Count

A full package comprises a plastic postal bag, containing documentation and a moulded plastic specimen carrier comprising a transparent side holding vials of survey material and/or a slide carrier and an absorbent side that will absorb up to 50ml of liquid, i.e. the entire contents of the package, in the event of a breakage.

Specimens are only included for the tests for which you are registered. If you do not receive the expected combination of specimens, notify us immediately so that appropriate action can be taken.

Repeat specimens may be requested by Email: haem@ukneqas.org.uk or Tel: +44 (0)1923 587111

#### 2.0 Information required for Control of Substances Hazardous to Health (COSHH)

This information is printed on a separate information sheet and should be reviewed by your COSHH assessor for consideration of any changes necessary to your local work practices.

#### 3.0 Use of packaged material

This material is for use in External Quality Assessment Surveys to assess laboratory performance.

#### 4.0 Blood films for Morphology Survey

Please perform a Manual Differential Leucocyte Count on **2308BF1 / 2304DF**. In any UK NEQAS exercise normal laboratory practice should be followed as far as possible. In the case of a differential count, this would usually be a 100-cell differential count. In some circumstances greater precision is required for a patient's sample so the laboratory protocol should be followed. For example, if a patient has 90% circulating blast cells then a 100-cell count is quite sufficient. However a peripheral blood blast count of 20% is sufficient for a diagnosis of acute leukaemia and precision then becomes important. Similar principles apply when monocyte counts and eosinophil counts are near to diagnostically important thresholds. The WHO classification requires that at least 200 peripheral blood cells be counted when considering a diagnosis of a myeloid neoplasm. The number of cells counted in the differential count should be stated in the results entered. (Professor B. Bain)

#### **Patient details**

# **2308BF1 / 2304DF**Age (years) 63

Sex F Hb (g/L) 83 WBC (10<sup>9</sup>/L) 116.1

**Important note:** For the purposes of this differential survey the WBC above should be considered a 'total nucleated cell count'. If nucleated red cells are present a 'corrected total WBC' will need to be calculated and reported.

#### Differential count using automated cell classification systems (e.g., CellaVision)

Perform a differential count using your automated cell classification system in the usual way. The slide does not require staining. Enter your results before and after reclassification. If the slide is rejected, note this in your comment. You need to register to use this option. There is no additional charge and you may submit both manual and automated differentials.

#### Specimen handling and disposal

• The material should be handled and discarded as patient material

#### 5.0 Return of results

- Return your results on line at <u>www.ukneqash.org/sampleentry</u> or by email to <u>haem@ukneqas.org.uk</u> providing your PRN.
- If you find the specimen quality unsatisfactory, tick the 'unsatisfactory' box and note the details in the Comment box.

#### 6.0 Next Distribution:-

The next Blood films for manual leucocyte count (2401DF) is scheduled for 4th of March 2024.