

**UKNEQAS Haematology 'Wish-list' for Blood Film Morphology cases**

**We are keen to hear from any participants who might be able to help provide us with fresh material that we can use for our Blood Film Morphology surveys. A list of conditions we would be interested in is given below. If you think you might be able to help please get in touch using the number or email address above.**

Glandular fever/CMV/Toxoplasmosis/drug reaction for atypical mononuclear cells	Haemolytic disease of the Newborn (erythroblastosis fetalis)
AML-3 variant and classical	Chronic myeloid leukaemia – Ph positive
Atypical chronic myeloid leukaemia	Plasma cell leukaemia
Follicular lymphoma	B & T-PLL
Pelger-Huet	May-Hegglin (not Chediak-Higashi)
Post-surgery or ANC/post-natal film with neutrophilia and toxic granulation	Leuco-erythroblastic blood film
Hairy cell leukaemia or SLVL	Normal film (several !)
Post-splenectomy PK deficiency	Lead poisoning
Any malaria	Other parasites eg filariasis, trypanosomiasis
Thalassaemia major and intermedia (and another thal trait)	Haemoglobinopathies; SC, S-Thal, Hb H, including AS, AC, AE, CC, C-Thal etc
Chronic renal failure	'Pure' idiopathic primary myelofibrosis
Mantle cell lymphoma	Hereditary spherocytosis / AIHA
Severe iron deficiency on treatment with a dimorphic picture or Coeliac disease	CHAD (low grade with low incidence of agglutinated red cells)
Anorexia nervosa	Post-splenectomy film from a normal individual
Thrombotic Thrombocytopenic Purpura (TTP)	Neonatal film
G6PD deficiency (acute episode)	Chemically damaged red cells
Severe iron deficiency untreated	Polycythaemia rubra vera; new untreated case
Pernicious anaemia	Alcoholic liver disease without anaemia
Spur cell anaemia, alcoholic with severe hepatocellular disease	Drug induced macrocytosis, eg hydroxyurea in CGL or SCA
ITP, pre-splenectomy or post-splenectomy	T-cell LGL leukaemia
Burns patients	Circulating bacterial infection



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