

Hematology—2023

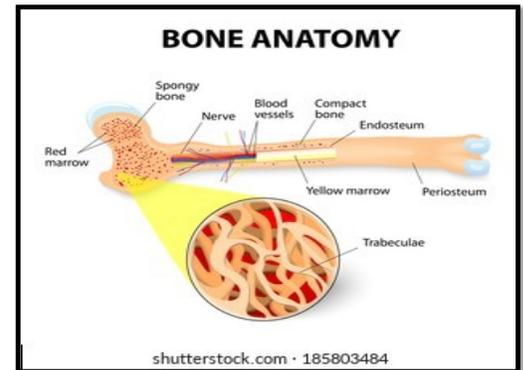
- Study of Blood and Blood-forming Tissue
- Includes
 - Bone marrow, Blood, Spleen, Lymph system

Hematopoiesis

- Blood cell production
- Occurs within bone marrow

Bone Marrow

- Soft material in core of bone
- The red marrow produces blood cells
- Marrow is able to respond to meet the body's demands
- Produces hematopoietic stem cells that mature/differentiate to become:
 - Erythrocytes
 - Leukocytes
 - Platelets



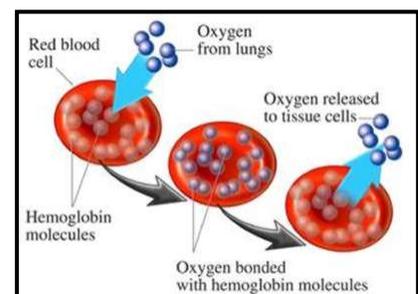
Major Components of Blood

- Plasma- 55%
 - Composed of water, proteins, electrolytes, gases, nutrients, waste
 - Serum = plasma without clotting factors
 - Plasma proteins: albumin, globulin, clotting factors (mostly fibrinogen)
- Blood cells- 45%
 - Erythrocytes: O₂ transport
 - Leukocytes: Protection from infection
 - Thrombocytes: Promote coagulation

Important Roles of Blood:
Transportation, Protection,
Coagulation!

Erythrocytes

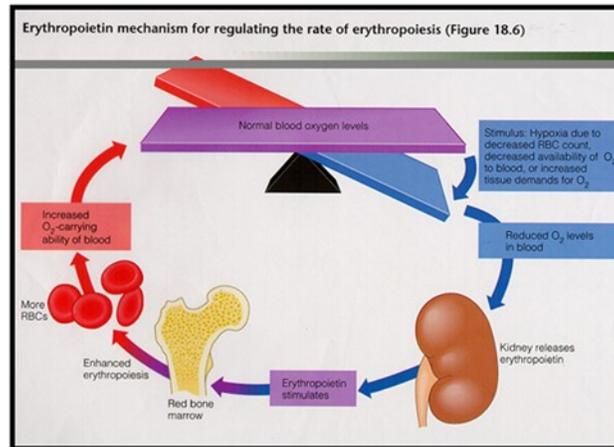
- RBC Lifespan 120 days
- RBC Function
 - Transport O₂ and CO₂
 - Assist in acid-base balance
- Reticulocyte
 - Immature RBC
 - Mature into erythrocyte within 48h of release
 - Reticulocyte count measures rate at which RBC's appear in circulation
- Hemoglobin
 - Major component of RBC
 - Made of
 - Heme (iron compound)
 - Globin (protein)



Erythropoiesis (Making Erythrocytes)

- Stimulated by oxygen requirements (hypoxia)
 - Erythropoietin released by kidney
 - Stimulates bone marrow to increase RBC production

- Essential nutrients needed to produce healthy RBC's
 - Iron, Cobalamin (Vit B12) and Folic Acid
- Hemolysis: Erythrocyte Destruction
 - Macrophages remove abnormal, defective, and damaged RBC's from circulation
 - Occurs in bone marrow, liver, spleen
 - Heme converted to bilirubin
 - Iron (recycled)
 - Globin breaks down into amino acids to build proteins (recycled)



Leukocytes

- Granulocytes
 - Neutrophils
 - First to arrive at site of infection
 - Primary phagocytic cells in acute inflammatory response
 - Mature neutrophils = segmented neutrophils
 - Immature neutrophils = bands
 - Increased % of bands called "shift to the left"
 - Indicates worsening infection
 - Eosinophils
 - Formed during allergic response to allergen- Antigen/Antibody response
 - Defend against parasitic infections
 - Basophils
 - Allergic and inflammatory reactions
 - Release heparin, serotonin, and histamines
 - Mast cells are basophils but they reside in connective tissue and play a key role in inflammation, permeability of blood vessels, and smooth muscle contraction.
- Agranulocytes
 - Lymphocytes
 - Immune response
 - B cells & T cells
 - Some circulate, others live in lymphoid tissue
 - Monocytes
 - Potent phagocytic cells
 - Engulf bacteria, dead cells, tissue debris, defective RBC's
 - Second type of WBC to arrive at injury
 - Migrate into tissues and become macrophages

- Kupffer cells in the liver, osteoclasts in the bone, alveolar macrophages in the lungs

Thrombocytes

- Initiate clotting process by producing platelet plug at site of injury
- Immature platelet = megakaryocyte which
- Live 8-10 days

Additional Components of the Hematologic System

Spleen

- Hematopoietic:
 - Produces RBC's during fetal development
- Filtration:
 - Removes old and damaged RBC's from circulation
 - Removes Hgb from RBCs and returns iron back to bone marrow for reuse
 - Filters out bacteria
- Immunologic
 - Rich supply of lymphocytes and monocytes
- Storage:
 - RBCs
 - 30% of total platelets stored here

Lymph System

- Consists of: lymph fluid, lymphatic capillaries/vessels, ducts, and nodes
- Carries fluid and nutrients from interstitial space back into circulatory system
 - Prevents edema
- Lymph fluid
 - Similar to blood plasma
 - Usually pale yellow
- Lymph capillaries
 - Larger than blood capillaries
 - Unidirectional flow
 - Lymphangitis = Inflammation of one or more lymphatic vessels
- Lymph nodes
 - Filter pathogens and foreign particles carried by lymph fluid
 - Swollen from inflammatory conditions, abscess, cancer, or infection
 - Lymphadenopathy = Disease of lymph nodes
 - Also used to indicate enlarged lymph nodes
- Lymph system
 - Capillaries carry "cleansed" lymph fluid to right lymphatic duct or left lymphatic duct (also called thoracic duct)
 - Lymphatic ducts drain into subclavian veins
 - Returned to circulation
 - Lymphedema = Too much interstitial fluid or reduced absorption
 - May occur as a complication of mastectomy or lumpectomy

Liver

- Functions as a filter → phagocytic Kupffer cells
- Stores excess iron
- Produces procoagulants essential to hemostasis and blood coagulation

- Vitamin K

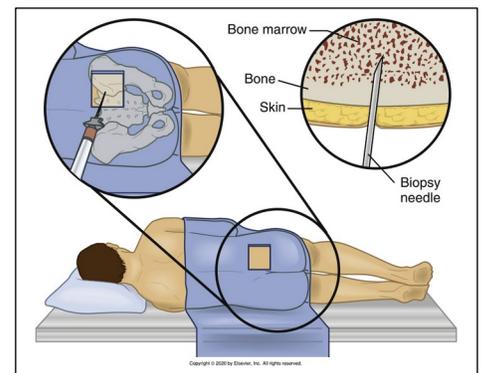
Gerontologic Considerations

- Can maintain adequate blood cell levels, but have decreased reserve
 - Hemoglobin levels decrease
 - Reticulocyte production less rapid
 - RBC's more fragile
 - Platelets w/ increased adhesiveness
 - More difficulty fighting infection – decreased lymphocyte function

Diagnostic Studies

- Laboratory Studies
 - Complete blood count
 - RBCs, WBCs, and platelets
 - Pancytopenia = Suppression of the entire CBC
 - Peripheral smear
 - Morphology of blood cells (size & appearance)
 - Red blood cells
 - Female: _____ million/mcL
 - Male: _____ million/mcL
 - Hemoglobin value (Hgb)- measurement of oxygen-carrying capacity of the RBC
 - Male : _____ g/dL
 - Female: _____ g/dL
 - Hematocrit value (Hct)- determines the % of total blood volume that is made up of RBCs
 - Male : _____%
 - Female: _____%
 - RBC indices-special indicators that reflect RBC volume, color, and hgb saturation
 - MCV (Mean Corpuscular Volume) – size of RBCs
 - MCH (Mean Corpuscular Hemoglobin) – weight
 - Erythrocyte sedimentation rate (ESR/Sed rate)
 - Nonspecific measure of inflammation
 - White blood cells
 - Total WBC count = _____ mcL (microliter)
 - Differential count
 - % of each type of leukocyte
 - Neutrophils: 50-70%
 - Eosinophils: 2-4%
 - Basophils: <2%
 - Lymphocytes: 20-40%
 - Monocytes: 4-8%
 - Bands: “Shift to left” refers to increase in number of immature neutrophils released (severe infection)

- Platelet count
 - Usually _____/mL (microliter)
 - Thrombocytopenia - _____
 - Danger of spontaneous hemorrhage
 - Thrombocytosis - _____
 - Danger of excessive clotting
- Blood Typing and Rh Factor
- Iron Studies
 - Serum iron
 - Females: 60 – 160 mcg/dL
 - Males: 80 – 180 mcg/dL
 - Total iron-binding capacity (TIBC)-provides a measurement of all proteins that act to bind or transport iron between the tissues and bone marrow
 - Ferritin – stored iron
 - Transferrin saturation – amount of iron attached to transferrin (more accurate indicator of amt of iron in body)
- Radiologic Studies
 - Computed tomography (CT)
 - Magnetic resonance imaging (MRI)
- Biopsies – Bone marrow examinations and/or Lymph nodes
 - Bone marrow examinations
 - Diagnose causes of blood disorders, eval bone marrow function, or stage lymphomas or other CAs
 - Aspiration = liquid portion of bone marrow
 - Biopsy = Coring of bone
 - Pre-procedure
 - Informed consent
 - Side-lying or prone position
 - Sterile technique
 - Preferred site
 - Posterior iliac crest
 - Can also use
 - Anterior iliac crest
 - Sternum
 - Client Education
 - Local/systemic pain control
 - May feel brief pressure/pain
 - May hear crunching sound as needle enters bone



<https://www.youtube.com/watch?v=HqWlcSp9SIs> (Crash Course Review of Hematology)

https://www.youtube.com/watch?v=l7orwMgTQ5I&list=PL8dPuuaLjXtOAKed_MxxWBNaPno5h3Zs8&index=44
(Crash course Review of The Lymph System)