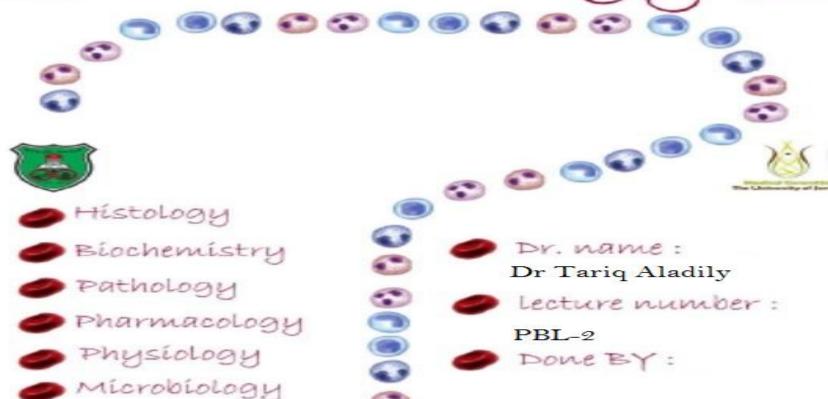
# m Hematology m









# Clinical approach in Hematology

#### Case one

24 yr old female complains of

Dizziness, Fatigue, Shortness of breath especially on exertion and Headaches for the last 2 months. She has been losing scalp hair.

She does not eat red meat and has reported heavy

menstrual bleeding.

Her physical exam showed

Lab and Xray test showed

Likely Diagnosis



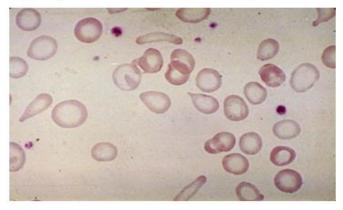




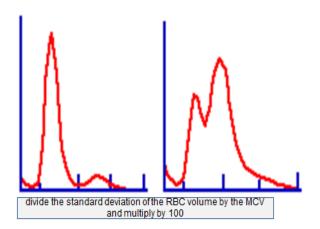


- Hb 8 g/dl, MCV 65 fl, RDW 20%, MCH 19 pg, Retcs 0.8%
- Blood film
- RDW
- serum Ferritin 2 ng/ml, TIBC 450 μg/dL, serum Fe 10 μg/dL,B12, Folate:
   normal
- Dx: IDA

Severe Hypochromia & Anisocytosis, Poikylocytosis: Iron Deficiency Anemia



RDW: Normal + Abnormal



#### **Case TWO**

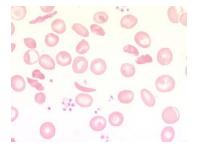
18 yr old male complains of acute pain in his back, Dizziness, Fatigue, Shortness of breath and Headaches for the last 6 hours. He has had similar attacks.

Physical exam showed Lab and Xray test showed

**Likely Diagnosis** 

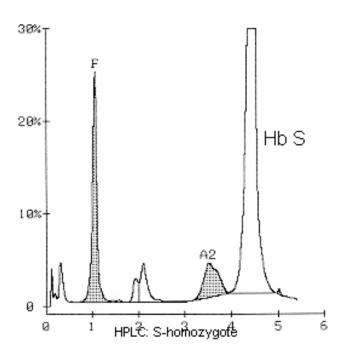


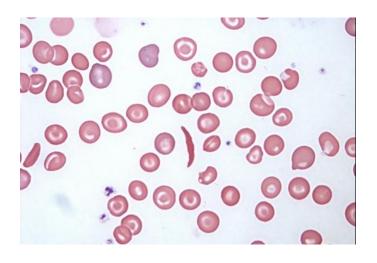


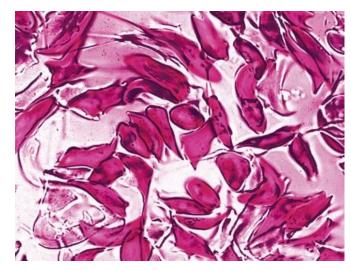




- Hb 9g/dl, MCV 80 fl, RDW 18%
- Blood film
- Sickling test: reducing agent
- Hg electrophoresis







#### **Case Three**

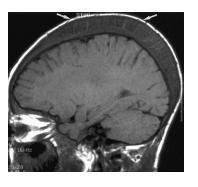
13 yr old male complains of skin pigmentation, abdominal swelling and pallor. He has been receiving blood transfusions

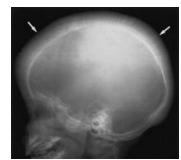
since the age of 9 months.

Physical exam showed
Lab and Xray test showed
Likely Diagnosis



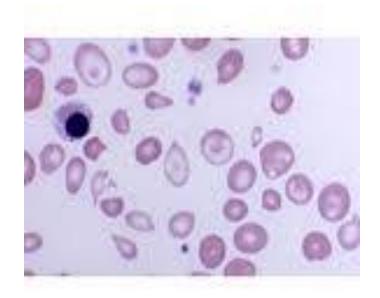


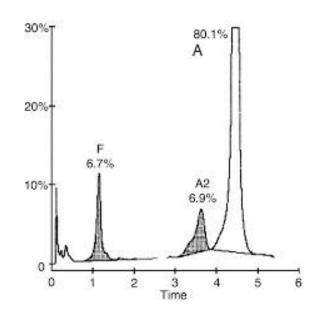






- Hb 5.6g/dl, MCV 55 fl, RDW 18%, Retcs 12%
- Blood film
- Serum Ferritin 6000ng/ml
- Hb electrophoresis





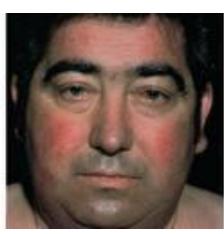
#### **Case four**

50 yr old man complains for several weeks of hotness in his face, itching and severe acute pain in his big toe.

Physical findings

Likely diagnosis







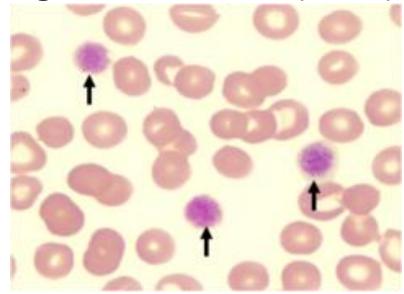
- Hb 19, WBC 17,000, Platelets 500K
- Serum Uric acid 12mg/dl (<6)</li>
- Serum erythropoeitin 10 mU/ml (2-19)
- Jak2Mutation +

#### Case five

 3 year old kid presented with unexplained large bruises over skin. Physical examination showed no sings of anemia. Abdominal palpation of the left upper quadrant showed palpable small movable mass.



- Hg 15, WBC 8, Plt 50
- Blood film
- PT, PTT: normal
- Bleeding time: 19 min (3-10)

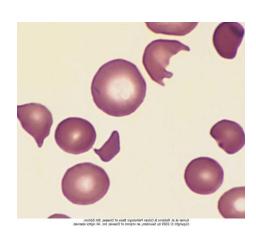


#### Case six

- 22 year old man, presented with widespread skin rash, fatigue, fever, confusion, decreased urination.
- Physical examination



- Hg: 9, WBC 10, Plt 30
- Blood film
- PT, PTT: normal
- Bleeding time: 40 min
- Fibrin degradation products: negative
- Serum LDH: 1,000 (<400)</li>
- Blood urea nitrogen: high



#### **Case SEVEN**

19 yr old boy complains of repeated attacks of large joint painful swelling especially in his knees for several years. His maternal uncle has similar condition.

Physical findings Likely diagnosis





- Hg: 6, WBC 8, Plt 180
- PT 12/12 s, PTT 100/30s, BT 7/20 min
- Mixing study: PTT: 30/30
- Factor VIII: <1%, Factor IX 100%</li>

• Diagnosis: Hemophilia A/ Severe

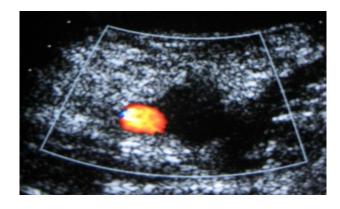
### **Case Eight**

49 yr old lady complains of painful selling and hotness of her L leg following coming back from visiting her relatives in USA. She had repeated attacks of cough with hemoptesis and shortness of breath.

Physical findings Likely diagnosis



- 1- Duplex Us: DVT common femoral vein with PE
- 2- Found to have Protein C deficiency

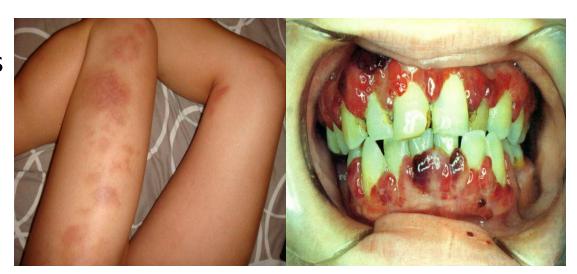


#### **Case Nine**

29 yr old lady complains of fever and painful gums for 1 week. She developed easy bruising and hemorrhagic spots

on her trunk.

Physical findings Likely diagnosis

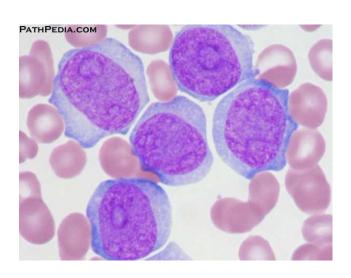


Hb 8.5 g/dl, Wbc 37,000, 70% blasts, 12% monocytes. Platelets 24

Serum uric acid 10 mg/dl

Bone marrow: 80% blasts

CD34 +



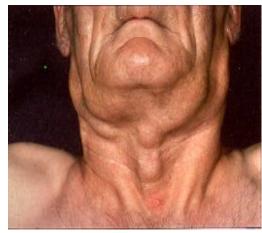
#### **Case TEN**

69 yr old man complains of fever and cervical and axillary swelling for several months with occasional fever and productive purulent cough.

Physical findings Likely diagnosis







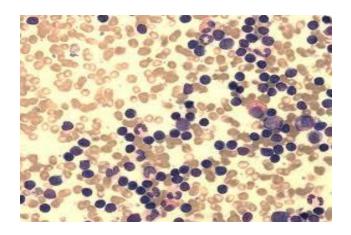
Hb 10, WBC 123, Plt 95

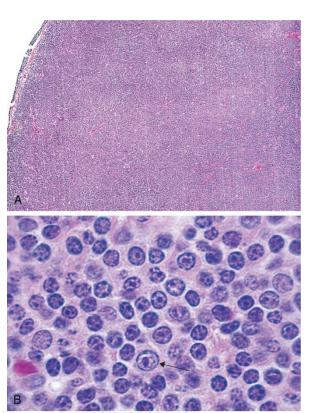
Blood film

Serum LDH: 1200

CD3: negative, CD20: positive

Dx: SLL/ CLL





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#### Case ELEVEN

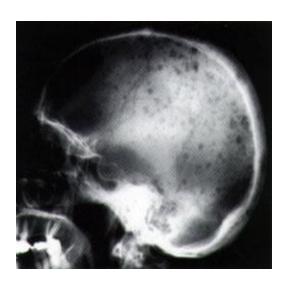
57 yr old man complains of back pain for several months and fracture of his L leg 2 days ago.

Lab and Xrays

Physical findings

Likely diagnosis





Hg: 7, WBC: 8, Plt 200

Blood film

• ESR: 120

BUN: high

Serum albumin: low, B2 microglobulin: high

Serum calcium: 13 mg/dL (5-10)

Serum protein electrophoresis: peak IgG-Kappa

