

Rodak: Hematology, 4th Edition

Chapter 01: An Overview of Clinical Laboratory Hematology

Test Bank

MULTIPLE CHOICE

1. Hematology is the study of:
 - a. Blood cells
 - b. Serum electrolytes
 - c. Plasma hormone levels
 - d. Bacteria in the blood

ANS: A

Hematology is the study of blood cells—their number, production, and morphology. Plasma and serum electrolytes and hormone levels are evaluated in various subdivisions of clinical chemistry, and bacteria are evaluated in clinical microbiology.

DIF: Cognitive Level: 1 REF: page 1

2. The morphology of blood cells is important to evaluate:
 - a. Every time a complete blood count (CBC) is requested on a patient
 - b. When an instrument-generated flag is obtained
 - c. When flag limits established by clinical laboratory scientists in the laboratory are exceeded
 - d. When the white count is elevated

ANS: C

Every laboratory must determine, based on its instrumentation, needs of the clinician and other parameter flags that alert the clinical laboratory scientist to the necessity for further evaluation, by examining cell morphology. Many instrument-generated flags, although useful, may not require review. If an automated CBC does not suggest the need, then no reason exists to evaluate the blood film, even if the white count is elevated.

DIF: Cognitive Level: 2 REF: page 4-5

3. Who is ultimately responsible for determining the specimen integrity before analysis?
 - a. Clinical laboratory scientist
 - b. Nursing staff
 - c. Phlebotomist
 - d. Specimen-processing personnel

ANS: A

The clinical laboratory scientist is responsible for ensuring the integrity of a specimen before analysis. Only he or she can judge whether the specimen is acceptable so that valid results can be obtained. Acceptable criteria include such things as type of specimen for the test ordered (e.g., blood, serum, urine); appropriate additive present (if needed) and amount of specimen relative to the additive; time interval since obtained; and presence or absence of hemolysis, lipemia, and other similar conditions. None of the other personnel named have the education and understanding to fully make that judgment.

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4. Hematocrit is also called:
- White cell count
 - Bone marrow examination
 - Red blood cell (RBC) count
 - Packed red cell volume

ANS: D

Historically the hematocrit was determined by centrifuging an aliquot of anticoagulated whole blood under specified conditions (e.g., centrifugal force, capillary tube length and bore diameter) and then determining the ratio of the space occupied by the packed red cells compared with that of the entire blood volume in the capillary tube, often expressed as a percentage. Hence, it is also called the *packed red cell volume*.

DIF: Cognitive Level: 1 REF: page 2

5. The primary function of platelets is to:
- Defend the body against bacterial invasion.
 - Carry oxygen to tissues.
 - Facilitate blood clotting.
 - Regulate acid-base balance.

ANS: C

Whenever disruption occurs to a blood vessel so that bleeding results, platelets respond initially to stop the bleeding in small vessels; they also play an integral role in facilitating the formation of a blood clot. White cells defend against bacterial invasion; red cells (i.e., hemoglobin) carry oxygen to tissues; and a complex interaction of plasma electrolytes, proteins, and carbon dioxide participates in acid-base balance.

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6. Which of the following can be evaluated *only* through the microscopic examination of a stained blood film?
- White blood cell (WBC) count
 - Reticulocyte count
 - Hemoglobin concentration

d. Presence or absence of blood cell inclusions

ANS: D

Making and staining a blood film and then placing it under a microscope allow the clinical laboratory scientist to evaluate the morphology of blood cells and examine them for the presence or absence of blood cell inclusions. These inclusions are important for cell identification and, when abnormal inclusions are present, sometimes provide “clues” as to the cause of disease. All the other parameters mentioned are or can be performed using an automated hematology instrument, including reticulocyte counting.

DIF: Cognitive Level: 2

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