

REFERRING PRACTITIONER Sample Live Blood Analysis Report	PATIENT DOB: Test #: Date: Lab #:
---	---

HAEMATOLOGY/ LIVE BLOOD ANALYSIS (LBA)

Legend
 + = Slight
 ++ = Moderate
 +++ = Severe
 NR = Normal Range
 R = Right side
 L = Left side

		Comment
Red Cell Morphology	Microcytosis	-
	Macrocytosis	-
	Elliptocytosis	-
	Target Cells	-
	Acanthocytosis	-
	Schistocytosis	-
Immune System	Leucocyte	NR
	Hypersegmented Neutrophils	-
	Eosinophilia	++
	Leucocyte Viability	good to hyper
	Protoplasts	-
Digestive System	Protein Linkage	++
	Rouleaux Formation	+
	Erythrocyte Aggregation	-
	Thrombocyte Aggregation	++
	Spicule Formation	++ ↑
	Chylomicrons	-
	Atherosclerotic Plaque	-
	Red Crystals	-
	Yellow Crystals	-
	L Forms	+++

RESULTS

Comments:

GHOSTED RBC'S ? LOW EFA'S
 MOTILE COCCI FORMS NOTED
 ? INTEGRITY OF MUCOSA
 ? BOWEL

Suggest re-testing in 6 months

HAEMATOLOGY/ LIVE BLOOD ANALYSIS (LBA)

-2-

Microcytosis	Cells smaller than normal may occur in various anaemias eg. Iron deficiency and thalassemia.
Macrocytosis	Cells larger than normal may occur in various anaemias eg. B12 and / or folate deficiency and liver disease.
Elliptocytosis	May occur in iron deficiency, myelofibrosis and megaloblastic anaemia. May be seen in hereditary elliptocytosis.
Target Cells	May occur in chronic liver disease. May occur in some haemoglobinopathies and post-splenectomy.
Acanthocytosis	May be suggestive of liver and spleen malfunction.
Schistocytosis	May be a result of mechanical stress or trauma to rbc"s and also in some anaemias.
Leucocyte	Leucocytosis often indicates a bacterial infection and a leucopenia indicates a viral infection.
Hypersegmented Neutrophils	Often seen in B12 and /or folate deficiency, pernicious anaemia or as a congenital abnormality.
Eosinophilia	May indicate an allergy or a parasitic infection.
Leucocyte Viability	Reduced viability may indicate a decrease in cell mobility resulting from a compromised immune system.
Protoplasts	Presence may indicate a compromised immune system. They may be early forms of atherosclerotic plaque.
Protein Linkage	First stage of red cell adhesion may indicate poor protein metabolism, may progress to rouleaux if not corrected.
Rouleaux Formation	May indicate excess proteins and saturated fats and may result in lowered oxygen and iron transport.
Erythrocyte Aggregation	More serious form of RBC adhesion and may indicate elevated saturated fats and lipoproteins. May possibly affect the circulatory system.
Thrombocyte Aggregation	May be suggestive of excess fats and lowered bile production.
Spicule Formation	Mutated platelets may suggest liver dysfunction; may be due to excess drugs or alcohol, poor liver function due to fat build up or general toxicity.
Chylomicrons	If present in large numbers may indicate reduced fat and protein metabolism. Presence after fasting may indicate hyperlipoproteinemia.
Atherosclerotic Plaque	May indicate the most advanced stages of cholesterol deposit in the arterial lining.
Red Crystals	May indicate bowel toxicity and malabsorption.
Yellow Crystals	May indicate elevated uric acid levels.
L Forms	May indicate Bacterial fungal variants also known as pleomorphic organisms and "cell wall deficient" organisms. Candida albicans is in this category.