



Determination of the Differential & total Leukocyte Count (DLC&TLC)

- This slides contain both (Slides + Handout)
- Procedures in Female slide and handout are the same .Therefore, we put it as one procedure

Red: very important.

Green: only found in males' slides. Purple: only found in females' slides.

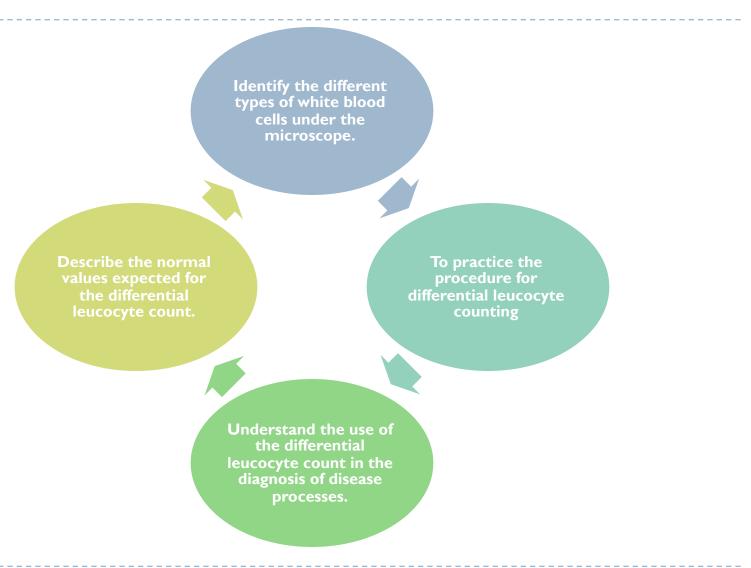
Gray: notes.

Physiology Team 436 – Foundation block – Practical (lecture 2- DCL)

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Lecture: If work is intended for in

Objectives



Introduction

What is Differential Leukocyte Count (DLC)?

- DLC is a routine test in hospitals which determine the percentage of each type of white blood cells in the total leucocyte population.
- Each type of WBCs performs a different function against infections and each type of infection yields a different white cell picture in the blood.
- Each type of WBCs has unique morphology and staining characteristics, which is responsible to specify the type of the cells.



النسب الحمراء هي بملزمة البنات واللي الدكتورة حرصت عليها

Types of WBC

Never Let Monkey Eat Banana Neutrophil , Lymphocyte , Monocyte , Eosinophil , Basophil

Most common → less common

كرات الدم البيضاء ذات النواة المتعددة الأشكال.

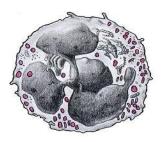
Agranular = A means not

. Granular (polymorphnuclear PMN)

2. A Granular

Neutrophil

Most commonly seen white blood cells in the circulating blood (40/50 -70)%



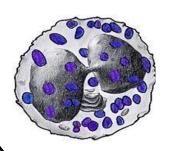
Eosinophil

Less common in the blood stream (1-6%). Some sources say (1-3 %)



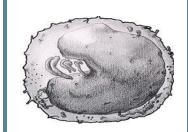
Basophil

The rarest of all white blood cells found in the blood (0-1%). Or (0.4–1%)



Monocytes

About 4-6% or 5-10% of the blood cells



Lymphocyte

About 25-35% of the blood cells

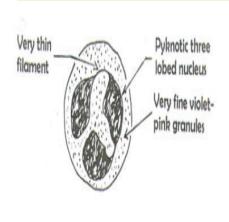


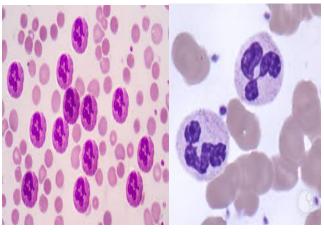
Neutrophils (10-16um) Some sources say 10-14 um

Clinical application:

It will increase in acute bacterial or fungal infections. (pyogenic illness)

Nucleus	Cytoplasm:	Cytoplasmic granules
 blue-violet Complex multi-lobed nucleus (from 2 to 6 lobes) connected by chromatin threads. Seen clearly through cytoplasm. 	• slate-blue in color	 Small Fine, closley-packed violet(purple)-pink. Not seen seperately Give ground-glass appearance Do not cover nucleus





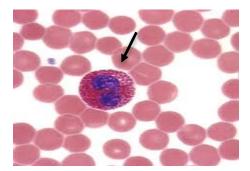
They have small cytoplasmic granules take a neutral (purple or color with various stains such as Wright's stain.

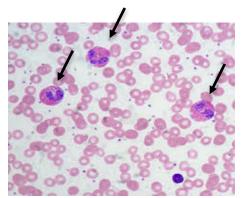
Eosinophils (10-15um)

Clinical Application:

It will increases in parasitic infections and allergies.

•	•			
Nucleus	Cytoplasm	Cytoplasmic granules		
 Blue-violet . 2-3 lobes. often is a dumbbell-shaped nucleus (bi-lobed). Lobes connected by thick or thin chromatin band. Seen clearly through cytoplasm. 	EosinophilicLight pink/redGranular	 Large , prominent , coarse , red to orange (eosinophilic) granules uniform size Seen seperatley Do not cover the nucleus 		





Nucleus is rarely more than bilobed, but is pyknotic with a deep blue-purple color



Numerous redorange granules of uniform size

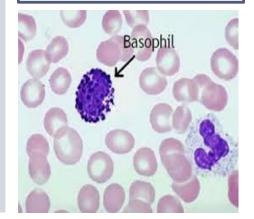


Basophils (10-15um)

Clinical application: It will increase in allergies and malignancies.

Nucleus	Cytoplasm	Cytoplasmic granules
 Blue-violet. Not clearly Seen through cytoplasm because it is covered by large granules. (somewhat hidden) Irregularly shaped; may be S shaped rarely (bi-lobed). 	BasophilicBluishGranular	 Basophilic Large, very coarse Variable size Deep purple Seen seperatley Completely fill the cell, cover the nucleus

granules contain
Heparin (an
anticoagulant).
and Histamine which
increases the
permeability of
capillary walls.



Numerous large, dark blue-violet granules that tend to be closely packed



Nucleolus is smaller round, non-segmented and stains lighter than the remainder of the cell



Monocytes

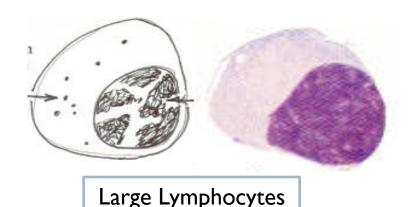
- It is the largest of all white blood cells in size (12-20um).
- Clinical application: it will increase in chronic infections.

Nucleus	Cytoplasm:	Cytoplasmic granules
 Pale blue-violet, Large single May be indented horseshoe-shaped, or <u>kidney-shaped</u> (can appear oval or round if seen from the side) 	 slate-blue in color. Abundant "frosty" Amount may be larger than that of nucleus 	•do not contain any granules.
Vacuoles Evenly disperred dust-like Nuclear crease Pseudopod Pseudopod Nucleus may cerebriform shoe shaped, elongated ba	particles y be or horse- , or an	

Lymphocytes

General characteristics:

- Deep blue-violet
- · Small, spherical cells with large, round nucleus in each of them.
- The Nucleus occupies most of the volume of the cell, leaving only a thin crescent rim of Cytoplasm around it.
- The cytoplasm of these cells does not contain any granules.
- It will increase in acute viral infections (infectious mononucleosis) and malignancies.





Small Lymphocytes

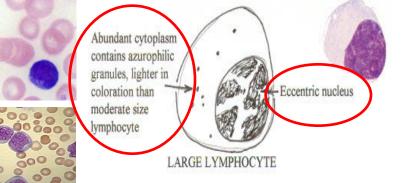
Small and Large Lymphocytes are explained in next slide

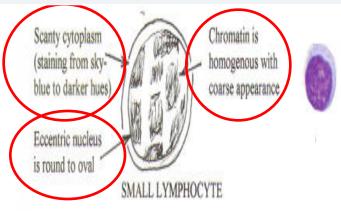
Large and small Lymphocytes (male slide)

	Large lymphocyte	small lymphocyte		
Nucleus	 Deep blue-violet Single, large, round or oval, almost fills cell. May be central or eccenric 	 Deep blue-violet Single, large, round, almost fills cell. Condensed lumpy chromatin, gives "ink spot" appearance. 		
Cytoplasm	 Large crescent of clear, light blue cytoplasm Amount larger than in small lymphocyte 	Hardly visibleThin crescent of clear, light blue cytoplasm		
Cytoplasmic granules	No visible	granules		
Exist and Size	(5-10%) , (10-15 um)	(20-40%) (7-9 um)		
	Abundant cytoplasm	Scanty cytoplasm Chromatin is homogenous with		

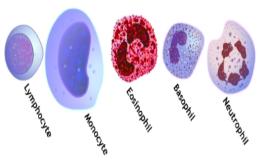








DLC Equipment & Procedures: DIFFERENTIAL LEUCOCYTE COUNT



Equipment

Light Microscope with an Oil Immersion Object

Mineral or Cedar wood Oil Various dyes for staining

blood films : Wright's
Stain & Leishman's
stain

Microscope Slides

Procedures



Using various dyes + microscope slide

I.Prepare a stained blood film with the help of Wright's stain

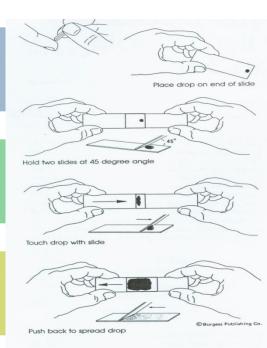


Using microscope with an oil immersion objectives + Mineral or Cedar wood oil

2.Set the stained blood film under the oil immersion objective lens in a light microscope



3.Identify various types of white blood cells according to their histological characteristics, count about 100 cells





Mind map



Clinical Application

NEUTROPHILS → will increase in acute bacterial or fungal infections pyogenic illness).

EOSINOPHILS →

will increases in parasitic infections and allergies.

LYMPHOCYTE →will increase in acute viral infections (infectious mononucleosis) and malignancies ...

BASOPHILS → will increase in allergies and malignancies.

MONOCYTES→will

increase in chronic infections.

Wright's Leishman's stain

stains are used in the preparation of blood films. 7

1- Granular

1-neutrophils:

- The most common type.
- Śmall cytoplasmic granules.
- Complex multilobed nucleus

2-eosinophils.

- Less common type
- Bi-lobed nucleus...

3- basophils.

- the rarest of all types.
- Large cell
- granules filled with heparin (anticoagulant) and histamine.
- 👡 Hidden nucleus.

1-Lymphocytes:

2-Agranular

- round nucleus.
- 25%-35% of blood.
- Nucleus occupies most of the cell volume

2-Monocytes:

- Largesticell of bloodicells
- Kidney shape of nucleus.

WBCs

Summary

78 A Textbook of Practical Physiology

Cell type	Diameter (µm)	Nucleus	Cytoplasm	Cytoplasmic granules
Granulocytes	rosq hased (predic	as againgt assignout. Lag	All Market Robb Arras	237634731745775444
Neutrophils (40-70%)	10-14 (1.5-2X a RBC)	 Blue-violet. 2-6 lobes, connected by chromatin threads. Seen clearly through cytoplasm. 	Slate-blue in color.	 Fine, closely-packed violet-pink. Not seen separately. Give ground-glass appearance Do not cover nucleus.
Eosinophils (1-6%)	10-15	 Blue-violet 2-3 lobes, often bi-lobed, lobes connected by thick or thin chromatin band. Seen clearly through cytoplasm. 	Eosinophilic.Light pink-red.Granular.	 Large, coarse. Uniform-sized. Brick-red to orange. Seen separately. Do not cover nucleus.
Basophils (0-1%)	10-15	 Blue-violet. Irregular shape, may be S-shaped, rarely bilobed. Not clearly seen, because overlaid with granules. 	Basophilic.Bluish.Granular.	 Large, very coarse. Variable-sized. Deep purple. Seen separately. Completely fill the cell, and cover the nucleus.

Summary continue

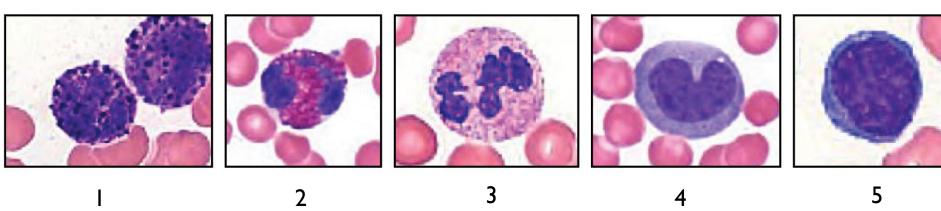
Agranulocytes				
Monocytes (5-10%)	12-20 (1.5-3 X a RBC)	 Pale blue-violet. Large single. May be indented horse-shoe, or kidney shaped (can appear oval or round, if seen from the side). 	 Abundant. 'Frosty'. Slate-blue. Amount may be larger than that of nucleus. 	• No visible granules.
Small Lymphocyte	tuon obamilia	enterpologista to	tan or water a carried with the following specific many and th	
(20-40%)	7-9	 Deep blue-violet. Single, large, round, almost fills cell. Condensed, lumpy chromatin, gives 'ink-spot' appearance. 	 Hardly visible. Thin crescent of clear, light blue cytoplasm. 	• No visible granules.
Large lymphocyte (5-10½)	10-15	 Deep blue-violet. Single, large, round or oval, almost fills cell. May be central or eccentric. 	 Large, crescent of clear, light blue cytoplasm. Amount larger than in small lymphocyte. 	No visible granules.

Summary

Blood	% of leukocyte	Size µ	Cytoplasmic staining	Nucleus morphology
Erythrocyte	V- V	7-8	pink, no granules	none
Neutrophil	50-70	10-12	salmon-colored small granules	Segmented,-2- 5 lobed
Lymphocyte	25-35	7-8	Light blue, scant amount, no granules	Single large Oval purple
Monocyte	4-6	16-18	Basophilic, no granules	Large, kidney shaped
Eosinophil	1-3	13-14	Bright red coarse granules	bilobed purplish
Basophil	0-4-1	14-15	Large, basophilic granules	Bilobed bluish black

Examine yourself!

What are these cells?



- What stains are used in the preparation of blood films?
- 1. Leishman's stain
- 2. Wright's stain

- I. Basophils
- 2. Eosinophils
- 3. Neutrophils
- 4. Monocyte
- 5. lymphocytes

Video describe WBCs:

Examine yourself!

I. What are the normal values of each different type of white blood cells?

NEUTROPHILS

→ 50 − 70 %

▶ EOSINOPHILS

• I − 3 %

BASOPHILS

0.4 – 1 %

MONOCYTES

4 – 6 %

LYMPHOCYTE

25 – 35 %

2. Under what conditions are the percentages of the various types of white blood cells increased?

▶ NEUTROPHILS

→

will increase in acute bacterial or fungal infections.

EOSINOPHILS

→

will increases in parasitic infections and allergies.

BASOPHILS

→

will increase in allergies and malignancies.

MONOCYTES

→

will increase in chronic infections.

LYMPHOCYTE

→

will increase in acute viral infections and malignancies.

Thank you!

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