

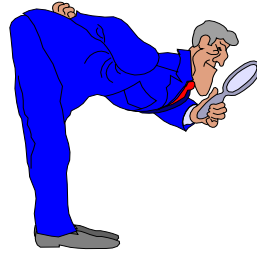
# ANOTHER *BLOODY* NEWSLETTER!

## February 2003

### LETTERS TO THE ED(ITOR)

*Why do my ASAPS and STATS take so long to get the results? Doesn't anyone care about the poor, sick animals?*

*Signed,  
Dr. Doolittle*



*Dear Dr. Doolittle,  
In Clinical Pathology, we try to get the lab work out as fast as possible. However, when most of the lab tests are marked ASAP or STAT, the problem becomes a matter of priority. We can't do everything at the same time.*

*Always right,  
ED\**

\*For example, by 1:00PM on 1/27/03, we received 37 samples for CBC's. Of these, 21 (or 57%) were ASAP or STAT.

*Do you have any questions for Dr. Doolittle? If so, please place them in our Clin Path Lab suggestion box.*

**Congratulations** to Cherie Heger for 15 years of service with the VTH!

**Please note:** You need an operator code, provided upon completion of training by Clin Path personnel for your department when performing **blood gases** on the ABL 505.

### **Hematology:**

Please check the "comments" field on the CBC results. Extremely important information regarding cell morphology and other parameters are included in this area.

### **Research CBCs:**

Our batch research CBCs come "a la carte". If plasma proteins or fibrinogens are desired, they must be requested separately.

### **CE: Multiple Myeloma interference in Total Bilirubin**

On 10/28/02, a discrepancy in the chemistry report on a 16 year old feline, case #168613 was noted. The Total Bilirubin report was 5.7

MG/DL. However, the Serum Indices Icterus report was: 0 MGD/L. Typically, these match within 1 unit of each other. The test was repeated and results duplicated. The Total Protein was 9.4 GM/DL, Albumin was 3.7 GM/DL, and Globulin was 5.7 GM/DL. The patient's diagnosis was multiple myeloma.

A Roche Diagnostics (the manufacturer of the Total Bilirubin test) June, 2002, Customer Bulletin stated that: "Results from certain multiple myeloma patient samples may show a bias in recovery. Not all multiple myeloma patients show the bias and the severity of the bias may vary between patients." The Roche System Application Sheet for Total Bilirubin states that there may be a "positive bias with the liquid Total Bilirubin Assay."

In multiple myeloma patients, the proliferating plasma cells have an abnormally high secretion of immunoglobulins. The immuno-electrophoresis test will show a spike pattern instead a broader pattern, because the immunoglobulins are of the same type. Some types of protein anomalies in multiple myeloma patients can interfere with the liquid Total Bilirubin test used in our lab. Dilution of the serum will eliminate the interference.

It is good quality control to make sure the Icterus index matches the Total Bilirubin result.

**Respectfully submitted by Cherie Heger**

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