

## Get more insight into CBC results with interpretive aids

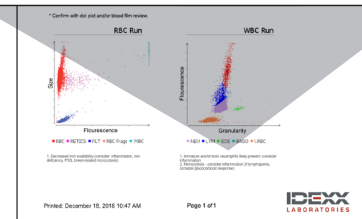
As a part of IDEXX's ongoing commitment to ensuring the best results for your patients, **interpretive aids are available for the ProCyte Dx\* Hematology Analyzer** to give you more insight into your complete blood count (CBC) results.

Interpretive aids use proprietary algorithms to detect results-based patterns in CBC results. These aids, combined with dot plot images, provide helpful insights and guidance for interpreting patient results.

You can find interpretive aids on the IDEXX VetLab\* integrated patient report (below the CBC result and dot plot images—shown at right) as well as in VetConnect\* PLUS.

Client: Lee, Thomas (126223)	Gender: Male/Castrated																														
Patient Name: Franz	Weight:																														
Species: Canine	Age:																														
Breed: Mixed	Doctor:																														
<table border="1"> <thead> <tr> <th>Test</th> <th>Results</th> <th>Reference Interval</th> <th>LOW</th> <th>NORMAL</th> <th>HIGH</th> </tr> </thead> <tbody> <tr> <td>ProCyte Dx (November 9, 2018 10:34 AM)</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>RETIC</td> <td>21.5 %</td> <td>5.0 - 8.0</td> <td></td> <td></td> <td></td> </tr> <tr> <td>HCT</td> <td>41.5 %</td> <td>35.0 - 45.0</td> <td></td> <td></td> <td></td> </tr> <tr> <td>HGB</td> <td>14.0 g/dL</td> <td>13.1 - 30.2</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>		Test	Results	Reference Interval	LOW	NORMAL	HIGH	ProCyte Dx (November 9, 2018 10:34 AM)						RETIC	21.5 %	5.0 - 8.0				HCT	41.5 %	35.0 - 45.0				HGB	14.0 g/dL	13.1 - 30.2			
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1. Immature and/or toxic neutrophils likely present—consider active inflammation
2. Monocytosis—consider inflammation (if lymphopenia, consider glucocorticoid response)



### If the analyzer detects...

BANDS suspect presence parameter

• or ▼RETIC and ▼HCT

▲RETIC and ▼HCT

▼LYMPH

▲MONO

▲ RDW

▼PLT yet •PCT

▼HCT, ▼MCHC, and ▼MCV

▼RETIC-HGB

▲HCT

▲RETIC and • or ▲HCT

▲MCHC or ▲MCH or both

▲ PLT

### The interpretive aid will say...

Immature and/or toxic neutrophils likely present—consider active inflammation.

Anemia without reticulocytosis—likely non-regenerative anemia; consider pre-regenerative anemia.

Anemia with reticulocytosis—likely regenerative anemia.

Lymphopenia—likely stress leukogram (glucocorticoid response).

Monocytosis—consider inflammation.

OR

Monocytosis—consider inflammation (if lymphopenia, consider glucocorticoid response).

Increased RDW—anisocytosis present—review blood film.

Normal PCT—likely adequate platelet mass.

Microcytic hypochromic anemia—likely iron-deficiency anemia.

Low RETIC-HGB—decreased iron availability (consider inflammation, iron deficiency, PSS, breed-related microcytosis).

Increased HCT—polycythemia.

Reticulocytosis without anemia—consider occult hemolytic or blood loss disease.

Increased MCHC or MCH—consider hemolysis (including sample collection/handling), lipemia, and Heinz bodies.

Platelet aggregates are detected. Platelet count may be higher than reported.

### Key:

▲ Above the reference interval

▼ Below the reference interval

• Within the reference interval