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# **COLLEGE OF HEALTH, AGRICULTURE & NATURAL SCIENCES**

DEPARTMENT OF BIOMEDICAL AND LABORATORY SCIENCES

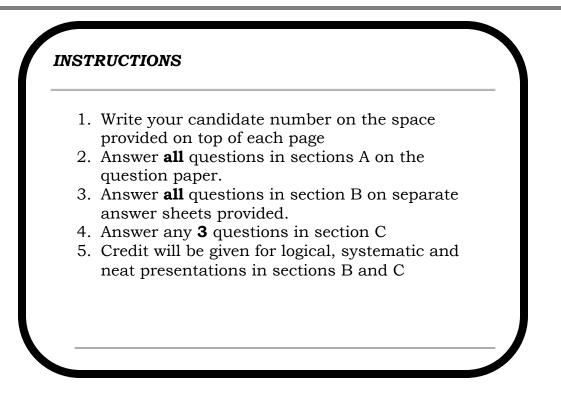
# NSLS407 Haematology II

# END OF SECOND SEMESTER EXAMINATIONS

# **APRIL 2023**

# **LECTURER: Mrs E. Govore**

# **DURATION: 3 HOURS**



# **SECTION A (40 marks)**

# Answer all questions by indicating T for TRUE or F for FALSE in front of each of the statements (a) to (e) in all the questions

- 1. The following are historical features of erythrocytosis
  - a. smoking
  - b. Low altitude
  - c. Acute lung disease
  - d. Chronic lung disease
  - e. Chronic renal disease
- 2. The following symptoms may occur in severe iron deficiency
  - a. pica
  - b. Ecchymosis
  - c. Glossitis
  - d. Petechiae
  - e. koilonychia
- 3. The following is true in Aplastic anemia
  - a. Inherited ---- Idiopathic
  - b. Activated Cytotoxic T cells in Blood & Bone marrow ---> Bone marrow failure
  - c. Fanconi's Anemia Acquired
  - d. Patient presents with Reticulocytosis
  - e. Patient presents wit pancytopenia
- 4. Anemia of chronic disorders is due to
  - a. Chronic infections
  - b. Chronic inflammatory disorders
  - c. Neoplastic disorders
  - d. Bleeding
  - e. Hemolysis

5. If you have the following indices what type of anaemia is it

MCV = 67fl MCH=20pg

MCHC=32%

- a. Normochromic normocytic
- b. Normochromic Hypochromic
- c. microcytic hypochromic
- d. microcytic normochromic
- e. Macrocytosis
- 6. The following is true about Chronic myeloid leukemia (CML)
  - a. is an inherited disorder
  - b. there is translocation between chromosome 9 and 22
  - c. Philadelphia chromosome is not common
  - d. basophilia is present
  - e. Eosinophilia is absent
- 7. The following conditions are Myelodysplastic syndromes (MDS)
  - a. Polycythemia Vera
  - b. Chronic myelomonocytic anemia
  - c. Refractory anemia with ringed sideroblasts (RARS)
  - d. Essential thrombocytosis
  - e. Mast cell disease
- 8. The following conditions are myeloproliferative disorders
  - a. Polycythemia Vera
  - b. Chronic myelomonocytic anemia
  - c. Refractory anemia with ringed sideroblasts (RARS)
  - d. Essential thrombocytosis
  - e. Mast cell disease

- 9. Factor VII deficiency patients present with the following laboratory results
  - a. Normal platelet count
  - b. Prolonged Prothrombin time
  - c. Prolonged APTT
  - d. Bleeding time maybe normal or prolonged
  - e. reduced FVIII
- 10. A patient with coagulation disorders in the common pathway can present with the following laboratory results
  - a. Normal platelet count
  - b. Prolonged Prothrombin time
  - c. Prolonged APTT
  - d. reduced FXII
  - e. reduced FVII
- 11. Match the following leukemias using the FAB classification for acute myeloid leukemia (AML)
  - a. M1 Acute Promyelocytic leakemia
  - b. M2 Acute myeloblastic leukemia with minimal maturation
  - c. M3 Acute myeloblastic leukemia with maturation
  - d. M4 Acute Myelomonocytic leakemia
  - e. M5 Acute monocytic leukemia

a..... b...... b..... c..... d..... d.....

12. Hemoglobin is produced by genes that control the expression of the Hb protein. Defects in these genes can produce abnormal hemoglobins and the conditions are termed "hemoglobinopathies. The following conditions fall under hemoglobinopathies

# Candidate number anemia megaloblastic anemia

- b. iron deficiency anemia
- c. sickle cell disease
- d. chronic myeloid leakemia
- e. Hb Constant Spring
- 13. The following statements are true concerning anemia of chronic disorders
  - a. Occurs in patients with Chronic infections
  - b. Occurs in patients Chronic inflammatory disorders
  - c. Occurs in patients Neoplastic disorders
  - d. Is due to Bleeding
  - e. Is due to Hemolysis
- 14. The following historic features may be seen in patients with erythrocytosis
  - a. smoking history
  - b. living at a high altitude
  - c. congenital heart disease
  - d. leakemia
  - e. Chronic lung disease
- 15. The following is true concerning leukomoid reaction
  - a. WBC count is low
  - b. Haemoglobin is high
  - c. Leucocyte alkaline score is high
  - d. Basophilia
  - e. eosinophilia

- 16. The following are examples of paraprotenemias
  - a. Multiple myeloma
  - b. Primary amyloidosis
  - c. Waldenström's macroglobulinemia
  - d. Heavy chain disease
  - e. MGUS (Monoclonal gammopathy of undetermined significance)
- 17. Patient with vascular disorders present with
  - a. Normal platelet count
  - b. prolonged Prothrombin time
  - c. prolonged APTT
  - d. Reduced Bleeding time
  - e. ecchymoses
- 18. Patient with haemophilia A present with
  - a. Normal platelet count
  - b. prolonged Prothrombin time
  - c. prolonged APTT
  - d. Normal Factor VIII assay
  - e. Normal Factor IX assay
- 19. Patient with haemophilia B present with
  - a. Normal platelet count
  - b. prolonged Prothrombin time
  - c. prolonged APTT
  - d. Normal Factor VIII assay
  - e. Normal Factor IX assay
- 20. The following are Quantitative platelet disorders
  - a. Glanzmann thrombasthenia
  - b. Bernard-Soulier syndrome

#### Candidate number . Hermansky-Pudlak

- d. Chediak-Higashi
- e. Wiskott-Aldrich syndrome

### SECTION B

# Answer all questions in this section.

# Each question carries 10 marks.

 Thalassemias are a group of inherited disorders of hemoglobin synthesis characterized by a reduced or absent one or more of the globin chains of adult hemoglobin. Fill in the given table the affected alleles and the genotype of the thalassemia. (10)

Alleles affected	Description	Genotype
a	alpha thalassemia silent	b
c	alpha thalassemia trait	d
<i>e.</i>	hemoglobin H disease	f
<i>g.</i>	Thalassemia major with hydrops fetalis	h

2. Discuss the Pathophysiology of Sickle Cell Anemia (10)

### SECTION C

#### Answer any three questions

### Each question carries 20 marks.

- **1.** Porphyria are a group of inherited or acquired disorders of heme production. With the aid of a diagram briefly explain the different porphyrias (20)
- **2.** With the aid of diagram briefly explain how you would stage Hodgkin's lymphoma (20)
- **3.** Briefly describe the schilling tests (20)
- **4.** With the aid of a diagram briefly discuss intravascular and extravascular haemolysis (20)
- **5.** Discuss the CLL clinical staging using the Rai staging system and the Binet staging system (20)