

**AUSTRALIAN BIOLOGICS TESTING SERVICES PTY LTD** ABN 83 057 347 387

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Patient: Tanelle Fletcher Ref. Dr. — + = Slight
 Address: — Test No. 1 ++ = Moderate
 Date: 12/12/03 +++ = Severe
 D.O.B. 12/8/63 Lab. No. BP 1729 NR = Normal Range

Live Blood Analysis examines living blood utilizing video enhanced high magnification darkfield and phase contrast microscopy.
 It gives valuable information about the body's function particularly the Digestive and Immune systems.

Category	Comment	Explanation
Anisocytosis	<u>+</u>	
Microcytosis	<u>+</u>	Cells smaller than normal, occurs in various anaemias eg iron deficiency and thalassemia.
Macrocytosis	<u>—</u>	Cells larger than normal, occurs in various anaemias eg B ₁₂ and/or folate deficiency and liver disease.
Poikilocytosis	<u>+</u>	
Elliptocytosis	<u>+</u>	Occurs mainly in iron deficiency, myelofibrosis and megaloblastic anaemia. Seen in hereditary elliptocytosis.
Target cells	<u>+</u>	Seen in chronic liver disease. Occurs in some haemoglobinopathies and post-splenectomy.
Acanthocytosis	<u>—</u>	Suggestive of liver and spleen malfunction.
Schistocytosis	<u>—</u>	Possible result of mechanical stress or trauma to rbc's and also in some anaemias.
Immune System		
Leucocyte	<u>↓ N.R.</u>	Leucocytosis often indicates a bacterial infection and a leucopenia indicates a viral infection.
Hypersegmented Neutrophils	<u>—</u>	Often seen in B ₁₂ and/or folate deficiency, pernicious anaemia or as a congenital abnormality.
Eosinophilia	<u>+</u>	Indicates an allergy or a parasitic infection.
Leucocyte Viability	<u>Average</u>	Reduced viability is indicated by a decrease in cell mobility resulting from a compromised immune system.
Protoplasts	<u>—</u>	Presence is indicative of a compromised immune system. They may be early forms of atherosclerotic plaque.
Digestive System		
Protein Linkage	<u>+</u>	First stage of red cell adhesion – indicative of poor protein metabolism, may progress to rouleaux if not corrected.
Rouleaux Formation	<u>—</u>	Indicates excess proteins and saturated fats and can result in lowered oxygen and iron transport.
Erythrocyte Aggregation	<u>—</u>	More serious form of RBC adhesion indicating elevated saturated fats and lipoproteins. Can affect the circulatory system.
Thrombocyte Aggregation	<u>+</u>	Suggestive of excess fats and lowered bile production.
Spicule Formation	<u>+</u>	Mutated platelets, suggestive of liver dysfunction; may be due to excess drugs or alcohol, poor liver function due to fat build up or general toxicity.
Chylomicrons	<u>—</u>	If present in large numbers indicative of reduced fat and protein metabolism. Presence after fasting may indicate hyperlipoproteinaemia.
Atherosclerotic Plaque	<u>—</u>	Represents the most advanced stages of cholesterol deposit in the arterial lining.
Red crystals	<u>+</u>	Indicative of bowel toxicity and malabsorption.
Yellow Crystals	<u>—</u>	Indicative of elevated uric acid levels.
L Forms	<u>+++</u>	Bacterial and fungal variants also known as pleomorphic organisms and "cell wall deficient" organisms. Candida albicans is in this category.

Comments: motile cocci + rods - 261T mucosa ? anaemia

ghosted RBC's - 1 EFA's