HORIBA

Yumizen

Chase the Case #52

- Acute Coronary Syndrome -

Patient Demography: Female, 77 years old.

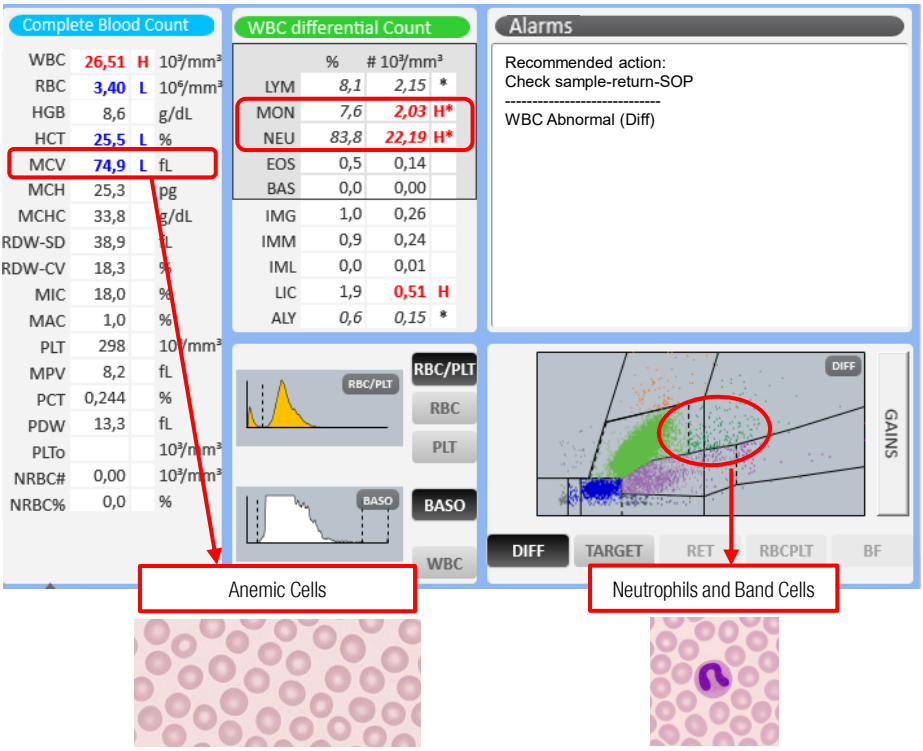
Diagnosis: Acute coronary syndrome in a septic and anemic patient.

Other Information: The patient presents a complex condition with acute coronary syndrome, sepsis (evidenced by leukocytosis and elevated CRP), and severe anemia. These factors increase cardiovascular risk and complicate the therapeutic approach.

Microscopic Review: Bands: 2%, Neutrophils 81.8%, Lymphocytes 8.1%, Monocytes 7.6%. Red blood cells with mild hypochromia, mild microcytosis, and occasional elliptocytes.

Other Tests: CRP 129, Urea 55.4, Troponin 871

How Yumizen H2500 assisted: On the DIFF scattergram, we observe marked neutrophilia and significant leukocytosis, consistent with an ongoing severe inflammatory or septic process. The analyzer also highlights critical anemia (Hb 8.6 g/dL) with microcytosis (MCV 74.9 fL), which is clinically relevant for transfusion decision-making. The presence of a *WBC Abnormal (Diff)* alarm reinforces the need for careful review and correlation with clinical findings. These hematological abnormalities—rapidly detected by Yumizen H2500 hematology analyzer—together with elevated troponin and CRP, support the diagnosis of acute coronary syndrome in a septic and anemic patient, enabling timely therapeutic intervention (antibiotics, hemodynamic support, and blood transfusion).



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