# SYLLABUS FOR LAB ASSISTANT IN MCD

## **HAEMATOLOGY**

- 1. E.S.R. Principles – normal and interpretation Various Method Demonstration. 2.
- Hemoglobin formation fate and functions, Normal ranges, physiological and pathological variations .3.
- Various principals for methods in Hemoglobinometry; Standardization. 4.
- Interpretation of TLC & DLC. Leukocytosis, Physiological and Pathological, Arneth counts, Leukopenia, eosinophilia, lymphocytosis, 5.
- Anaemia, R.B.C., morphology, normal and abnormal hypochromia, anisocytosis, polychromasia, Cabot Rings, Basophilic, Stippling, Reticulocyte. 6.
- The Hematocrit macro and micro methods; Hematocrit ratio to Hb, Erythrocytic indices,

Demonstration of Micohematocrit

- 7. Origin, formation and fate of Blood cells, Theories of Blood cellformation. Bone
- 8. Maturation of Blood cells - myeloid series. 9.
- Maturation of Blood cells lymphocyte and monocytic series and megakaryocytic series. 10.
- Maturation of Erythrocytic series Normoblastic and megaloblastic maturation. 11.
- Theory of Blood coagulation. Factors involved. Extrinsic and Intrinsic Pathway. Cascade
- 12. Various sample tests
  - a) Bleeding Time Duke and lvy method
  - b) Coagulation Time Lee White Capillary and Slide Method
  - c) Prothrombin Time 1 stage and 2 stage
  - d) Clot Retractione/
  - e) Platelet Count
  - f) Thrombin Time
  - g) Partial Thromboplastic Timeh
  - h) F.D.P.
- 13 Principle, interpretations and demonstrations
- Reticulocyte count various methodsInterpretations and Demonstration 14
- L.E. Principle various methods. ANF Test. Demonstration 15.
- PMNS smear, Filarial preparation, eosinophil count principle, interpretation and 16 source of error.
- Hemoglobin structure in detail, formations fate, abnormal Hemoglobin, methods of study Sickle 17 Test, Eb, electrophoresis test.Demonstration. 18
- Iron Metabolism
- Classification of anemia and microcytic (Iron Deficiency) anemia. 19
- Macrocytic anaemia including Pernicious Anaemia causes, Lab.Findings. 20
- Hemolytic anaemia Classification, Gen. Lab. findings. 21
  - a) Congenital anaemia. Spherocytic anaemia, Osmotic fragility
  - b) Acquired hemolytic anemia. Drug induced.
  - d Hemoglobinopathies, Sickle cell Hb.C. Thalassemia.
  - d) P N H and cold hemolytic anaemia.
  - e) Enzyme deficiencies including tests.
- 22 Aplastic anaemia, myelofibrosis
- Polycythemia, Leukemia acute and chronic 23
- 24 . Purpura and Hemorrhagic disease, Hemophilia
- Bone marrow aspiration. Staining and differential and reporting. 25

#### **BLOOD BANK**

- ABO System, antigens sub-groups of A Bombay O. Antibodies of ABOsystems. Nature of 1. 2.
- ABO testing slide and tube test. Reverse grouping. Discrepancies between cell and serum results, sources of error. Rouleaux formation andmethods of checking this. 3.
- Rh system. Nomenclature, Due system and its significance, nature of Rhantibodies. Clinical significance phenotype and genotype. 4.
- Rh grouping test. Slide or Rapid Tube Test. False positive and false negative results. 5.
- Cross matching of Blood. Principles, Reasons for X match. Saline albumin, Coombs,
- 6. Labelling of tubes, Methodology, legal implications, Incompatible Crossmatch. Auto antibodies, plasma expanders, multiple myeloma etc.affecting a X-match. Difficulties in Xmatching, and methods of investigations. 7.
- Anticoagulants for blood preservation, ACD, CPD, CPD A-1. Heparin advantages and Disadvantages. Shelf life of blood Changes taking placein blood on storage, Na, K etc.
- 8. Reception of donors, indirect questioning of eliciting medical history. Types of donors, Rejection of donors in certain diseases and history of diseases. Physical examination of donor and test done on donor's bloodfor safe transfusion of blood. Technique and importance of sterile technique in drawing blood.
- 9. Various donor reactions and their remedies. Facts of blood donations, precautions and care to be taken during and after blood donation. Need of giving refreshments to the donor. Emergency kit.
- 10. Coombs Test - Direct and Indirect. Principle, explanation of procedureand sources of error. Control, interpretation and clinical application. Different types of Coombs's sera.
- 11. Transfusion reactions. Handing of Transfusion Reactions in Blood Bank.
- Demonstration of Coombs Tests Direct and Indirect 12.
- 13. Hemolytic disease of the new born due to anti - D or ABO. Mechanismof the disease. Blood for exchange and tests done on cord blood.
- Other blood group systems. Kell, Duffy, MNS and its importance. H.L.A.system, Enzymes in 14. Blood Banking. Use of LISS.
- 15. Antibody Titrations, reasons and methodology.
- 16. Blood Component Therapy.

### IMMUNOLOGY AND SEROLOGY

- Definition of Immunity and the immune system of the body immuneresponses. Basic 1. definitions
- 2. Basic aspects of the immune response
  - a) Humoral division
  - b) Cellular division
- Antigens and heptens. Types of antigen. Types of immunizationHeterophile antigens, 3.
- Basic Structure, biological properties of immunoglobulins complement. 4.
- Methods of detection and measurement of antibody and antigen 5.
  - a) Preceipitation
  - b) Ring test (original C Reactive Protein)
  - c) Gel Immune diffusion. Single and double immuno-diffusion.
- Redial Immunodiffusion, counter immuno-electrophoresis Agglutinationtest. Direct 6. agglutination, Titration, Prozone reaction fibrile agglutinins.
- Slide agglutination and tube agglutination Widal tests, complement fixation test principle 7.

- Principle and interpretation of various, immunological tests done by the Laboratory.
- 8. Pregnancy test, (including the historical background and Bioassays). A SO, CRP, RP, ANF and autoimmune disorder, Wider VDRL (Kahn, was erman's test TPI, TPI, RPCF, FLA, ABS).
- 9. EIA and RIA Principle; Viral Hepatitis and the markers.
- 10. Syphilitic Serology Kahn, VDRL, RPR.
- 11. Indirect of passive agglutination
  - a) Using RBC as carriers (Coated RBC) Pregnancy tests HBs Ag.
  - b) Latex coated particles fixation, Bentonite, Rheumatoid factor; Pregnancy latest (Gravindex) pregtel ASL and CRPA.
- 12. Complement fixation tests and Wassermann Reaction
- 13. Immune Florescence tests

Fluorescent labeled antibody techniques.

F.T.A. for syphilis.

ANA or ANF tests for L.E.

- 14. Auto Immunity auto immune disease LE cell ANA or ANF
- 15. Hypogammaglobunemia
- 16. Hypergammaglobunemia Cryoglobunemia
- 17. Organ transplantation

## CLINICAL CHEMISTRY/ BIOCHEMISTRY

- 1. Principles in brief of the various methodologies.
- 2. Principle, brief procedure, Reagent ingredients and functions sources of errors and precautions and standardization.
- 3. Brief Metabolism and Clinical Interpretation.
- 4. Care and precautions, in general, to be used in Biochemical testing.
- 5. Urea Methods: a/ Diacetyl Monoxime b/ Bertholets
- 6. Bilirubin:
  - a) Mallery Evlem
  - b) Jendrassik and grof
- 7. Neonatal jaundice and direct spectrophotometric method of Bilirubin estimation Advantages and Disadvantages.
- 8. Creatinine
- 9. Enzymes general considerations, units of measurement, Factors Effecting and types of assays.
- 10. Amylase caraways method
- 11. Protein free filtrates
- 12. Creatinine estimation Jaffe's reaction
- 13. Calcium
- 14. CSF. Physical, chemical and cytological examination methods and procedures used and clinical interprets.
- 15. Basic concepts in Biochemistry, atomic and molecular symbols and formulae; various types of solutions, Molar, Normal definitions and calculations; various types of chemicals.
- 16. SGOT & SGPT Reitman frankel method
- 17. Alk P'tase. BLB method
- 18. Acid P'tase BLB method
- 19. Serum proteins. Total protein by Biuret method and Albumin by BCG method
- 20. Review of Beer34's Law and Spectrophotometry.
- 21. Principles of spectrophotometry and use of flame Photometer. Estimation of:
  - a) Na<sup>+</sup>
  - b) K<sup>+</sup>

- c) C1
- d) HCO3
- 22. Lipid metabolism and estimation
  - a) Cholesterol
  - b) HDL Cholesterol
  - c) Triglycerides
  - d) Total Lipids.
- Fractional test meal and analysis of gastric contents. Augmented histammic test. Hallenders test.
- 23 Transudates and exudates; Phosphorus.
- 24 Quality Control
- Acid, Base, PH, Indicators, Buffers.
- 26 Electrolytes, Acid, Base and Water balance
- 27 Primary and Secondary standards.
- 28 Revision of:
  - a. Carbohydrate
  - b. G.T.T. and metabolism, intermediary metabolism and Ketosis
  - c. Urea metabolism and Kidney function test.
  - d. Bilirubin metabolism and liver functions test.
  - e. Calcium and Phosphorus metabolism.
  - f. Proteins metabolism and electrophoresis
- 29 Brief understanding of:
  - a) T3 T4 TSH
  - b) CPK
  - c) VMA
  - d) Cortisols
  - e) Estrogen/Progesterone
  - f) Hormones
- Introduction to automation in clinical chemistry, Basic concepts, types of analyzers.

#### **URINE ANALYSIS**

- 1. Physical and Chemical examination of urine by strip appearance, colour, specific gravity, pH, Alb. Sugar.
- 2. Demonstration of technique; Chemical examination of urine by other methods. Albumin Sulfosalyclic acid method; Glucose Benedict's method.
- 3. Urinary sediments Methods of obtaining sediment; Organic and Inorganic sediments: normal and abnormal sediments.
- 4. Principles of Albumin tests with interpretation. 24 hour semiquantitative test for albumin; Bence Jones protein methodology.
- 5. Principle of tests for glucose in urine various methods.
- 6. Bile pigments and urobilinogen in urine; Principle and various methods; Demonstration of Harrson's Spot Test; Metabolism of bile pigments; Interpretation.
- 7. Watson's semiquantitative test and tests for Porphobilinogen; Demonstration of techniques.
- 8. Porphyrine in urine various tests; clinical significance; Demonstration of techniques.
- 9. Ketone bodies in urine principles and interpretation; Demonstration oftechniques.
- 10. Occult Blood in urine; principles, various methods; sources of error; Demonstration of technique.
- 11. Semen analysis; reasons for it and interpretation.
- 12. Urine calculi; reasons for formation; clinical significance; Demonstration of technique and test.
- 13. Semi quantitative and 24 hours tests for urinary calcium (Sulkowitch)and chloride (Fantu's);

- Demonstration of technique.
- 14. Tests for Melanin, Indian PKU, Homogentisic acid; Demonstration oftechnique.
- 15. Renal Function Tests – principle of concentration and dilution tests P.S.P. Dye Test.
- 16.  $Addis\ Count-Various\ preservatives\ for\ 24-hours\ samples\ of\ urine, volume\ of\ urine\ in\ 24-hours\ samples\ of\ urine, volume\ of\ urine\ in\ 24-hours\ samples\ of\ urine\ of\ uri$ hours; change in urine on standing.

## **BACTERIOLOGY**

- 1. Structure and Biology bacteria; respiration; reproduction, nutrition and growth.
- 2. Methods of sterilization with equipment used: a/ Physical

  - b/ Chemical
  - c/ Irradiation, etc.
- 3. Basic constituents of culture media; various types of culture media; Liquid and solid media; Semisolid media – differential, selective, enriched. 4.
- Methods of inoculation and streaking liquid; semisolid and platesaerobic and aerobic
- 5. Review Gram's and AFB staining methods and capsular and Albert's stain; demonstration in all of these to be taken regularly in the 1st month. 6.
- Gram +ve Staphylococcus. Catalase and coagulase tests. 7.
- Streptococci, Pneumococcus, bacitracin test, optochin and Bile solubility tests. 8.
- 9. Enterobacteriacae with classification, Code I, Code II, Metilities fullcode. 10.
- E Coli, Klebsiella and Enterbacter.
- 11. Edwardsiella, Alkalescens dispar, serratia and Hafnia with Gillies code. 12.
- Pseudomonas, Aeromonas, Mimae, Alkaligenes.
- 13. Proteus, Providence.
- 14. Salmonella, Citrobacter, Arizina.
- 15. Shigella
- 16. Vibrios, Hanging drop
- Non- intestinal gram negative bacteria; Hemophilus, Brucella; Pasterueulle, 17. Bordetella: Bacterioides.
- Gram positive bacteria (Corynebacteria; Listeria; Chosticia); Bacillus species 18.
- 19. Spirochetes and Spirillum
- 20. Mycobacteria
- 21. Virus Rickersia
- 22.
- 23. Normal flora of various areas in the body
- Chemical disinfectants and methods of study of disinfectants. 24.
- 25. Antibiotics and sensitivity.

### **PARASITOLOGY**

- Protozon classification and general morphology. 1.
- E.Coli, E. Histolytica and other Rhizopodia. 2.
- Flagelattes ex. Trichomonas, Giardia intestinalis, etc. 3.
- Malaria Parasites, Life cycle various stages. 4.
- Hemoglagellates, Trypanosomes Leishmania. 5.
- Nematode classification; Trichnella spiralis; Trichuris; Trichura. 6.
- 7. Round Worms and Pin Worm.

- Hook Worms and Strongyloides 8.
- Platyheliminths classification and names with general outline. 9.
- Tenia Saginata; T. Solium; H.Nana 10.
- Echinococcus Granulosus; D. Latum. 11.
- Tissue Nematodes; Wuchcheria Bancrofti Brugia; loa loa. 12.
- Onchocera; Dracunculose medinesis. 13.
- 14. Methods of Examination of Stool for Parasites and for Protozoa.

## **ELEMENTARY HISTOPATHOLOGY**

- 1. Introduction to Histopathology sources and types of Histopathological specimens received, records, labeling and general rules when receiving aspecimen.
- 2. Fixation, properties of fixing fluids, Classification of fixatives, simplefixatives and compound fixatives.
- 3. Decalcification
- 4. Processing - Dehydration, Principle. Various clearing agents, advantages and disadvantages of each.
- 5. Processing Count, Clearing, Principle. Various clearing agents, advantages and disadvantages of each.
- 6. Impregnation with paraffin. Type of paraffin. Advantages and Disadvantages.
- 7. Embedding and Blocking.
- Impregnation; embedding and blocking with various water soluble masses. 8.
- 9. Various equipments and methods used in Histology for processing, Histokinette etc.
- 10. Microtomes and Knaves, Care
- Hones, strops, homing and stropping, methodology and checking the results attaching blocks 11. to carriers.
- Cutting and sectioning knife angle. Errors in sectioning and their remedies. 12.
- 13. Separating and identifying sections.
- Decalcification of Stains, types of stains, mordents and differentiations. 14.
- 15. Separating and identifying sections.
- H & E staining methods and principles involved in staining. 16.
- 17. Papanicolaou staining.
- Skeletal system various bones, joints Bone Marrow, face bones, skull, vertebrate, ribs, pelvis, 18. Limbs.
- 19. Joints – movable and immovable.
- Muscular System, Muscles, tendons, ligaments, diaphragm. 20.
- Circulatory System, Heart, great blood vessels, arterial and venous system, capillaries, 21. foetal circulation.
- 22. Lymphatic system.
- 23. Respiratory system
- 24. Digestive System
- Nervous System 25.
- Endocrine system 26.