Work-up of PANCYTOPENIA

RISK FACTORS / PRACTICE POINTS:

- **EMERGENT REFERRAL**
  - Page Hematologist On-Call
  - Required for the following:
    - ANC <0.5 x 10^9/L
    - Platelets (Plt) <20 x 10^9/L
    - Symptomatic anemia in the absence of bleeding or iron deficiency (usually Hb <70g/L)
    - Blasts or schistocytes seen on the blood film

- **Likely reactive / non-neoplastic** due to drugs, critical illness, infections, connective tissue disease
  - Detailed History & Physical with particular attention to rule out ETOH / Cirrhosis
  - Referral to CCMB Hematology if persistent / symptomatic cytopenia

- **Blood Smear**
  - Abnormal Cells Present?
    - **NO**
      - **ANC <1.5 x 10^9/L?**
        - **NO**
          - Likely reactive / non-neoplastic due to drugs, critical illness, infections, connective tissue disease
          - Detailed History & Physical with particular attention to rule out ETOH / Cirrhosis
          - Referral to CCMB Hematology if persistent / symptomatic cytopenia
        - **YES**
          - Referral to CCMB Hematology for Suspected Heme Malignancy, Dysplasia or AA
    - **YES**
      - If Blasts, NRBC, Dyplasia or Immature WBC
        - URGENT Referral to CCMB Hematology for Suspected Heme Malignancy, Dysplasia or AA
      - If Schistocytes
        - EMERGENT Referral to CCMB for Suspected TTP or IUS

- **URGENT Referral to CCMB**
  - Hematology for Suspected Heme Malignancy, Dysplasia or AA

- **Detailed History & Physical** with particular attention to rule out ETOH / Cirrhosis

- **Referral to CCMB Hematology** if persistent / symptomatic cytopenia