# Microscopic Analysis of Urine

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#### **Specimen selections:**

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University Hospital Brno Department of Clinical biochemistry

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# Introduction

Semiquantitative urine analysis is one of the basic biochemical examinations. It consists of urine chemical properties determination by diagnostic strips and morphological examination of urinary elements. Both methods support each other in final determination of the result and both findings should correspond with each other. Urine analysis is required to be performed in one hour and is conducted from single sampling, preferably from the second urination in the morning. Nowadays, the analysis of urine is mostly automated. Manual microscopy is used only for determination of ambiguous or discrepant results.

The urine sediment for manual microscopy is prepared as follows: native urine sample is centrifuged in 2000 rpm and the supernatant is removed and the sediment resuspended to create a tenfold concentrated sample solution.

We use standardized staining (e.g. supravital staining) by Sternheimer for better recognition of elements. Staining reagent consists of 2 dyes (alcian blue and red pyronin B in 1:1 ratio). The staining reagent is added to the concentrated urine sample in 1:10 ratio.

In this database, we have sorted and described 3 variants of pictures.

- 1. Microscopic findings of stained sediment (10× concentrated urine sample with 400× magnification, Sternheimer staining)
- 2. Microscopic findings of native sediment (10× concentrated urine sample in 400× magnification)
- 3. Findings from automatic analyzer iQ 200 (Iris)

In the following links the database is prepared in a format suitable for print. For better recognition, some elements are magnified.

# **Erythrocytes**

Erythrocytes are red blood cells without nucleus, with size about 6–7  $\mu$ m and a disk-like shape. They count amongst the smallest and the most common elements in urine. Their presence in urine (hematuria) can be macroscopic or microscopic (without visible red color).

Causes for haematuria:

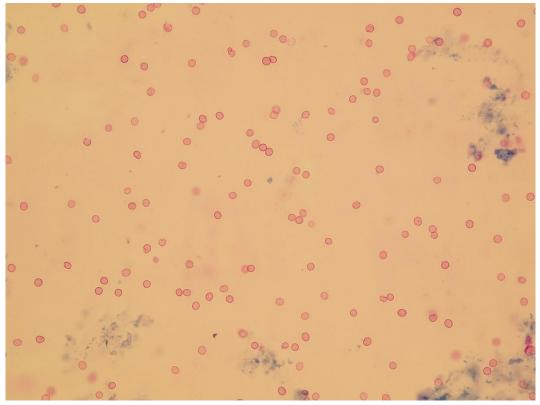
- Renal (glomerulonephritis, kidney cancer)
- Prerenal (hemocoagulation aberrations, muscle traumas, burns)
- Subrenal (bleeding in urinary tract infection, kidney stones, carcinoma)
- Exertion (physical stress, cold)

If the erythrocytes have a normal biconcave shape with smooth surface, they are called eumorphic erythrocytes. Erythrocytes that passed to urine through glomerular membrane might be damaged and their shape is changed – we call them dysmorphic erythrocytes.

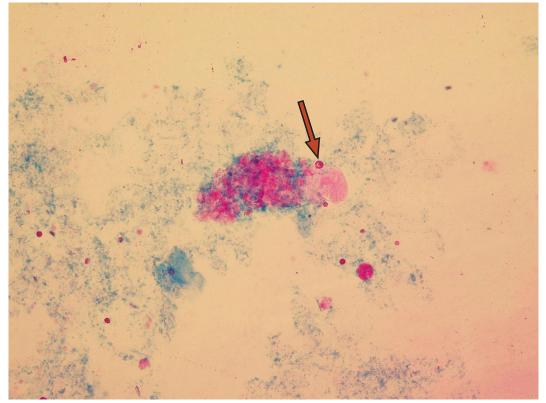
Dysmorphic erythrocytes may have a tire shape (codocytes) or the erythrocyte membrane may have protrusions (acanthocytes).

Hedgehog shaped or crenated erythrocytes (echinocytes) don't count among the dysmorphic erythrocytes. They are deformed by erythrocyte dehydration in urine with high osmolality.

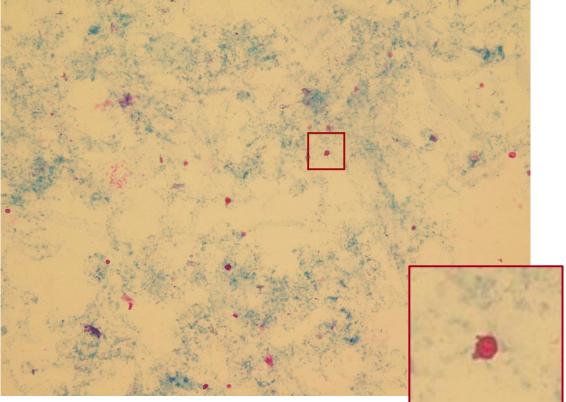
## Stained sediment



Erythrocytes

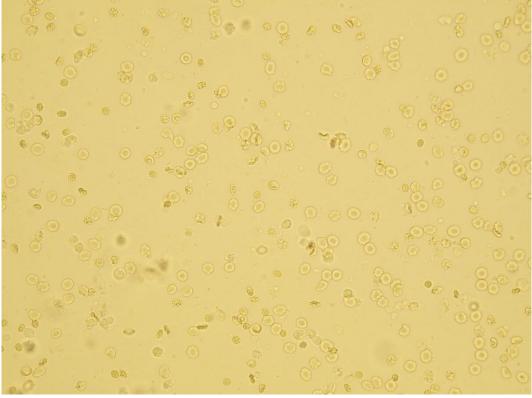


Dysmorphic erythrocyte – codocyte

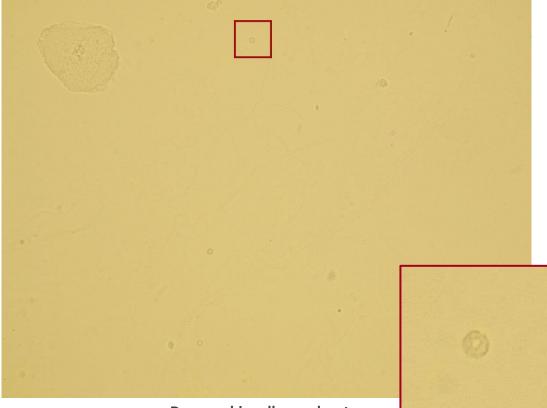


Dysmorphic erythrocytes – acanthocytes

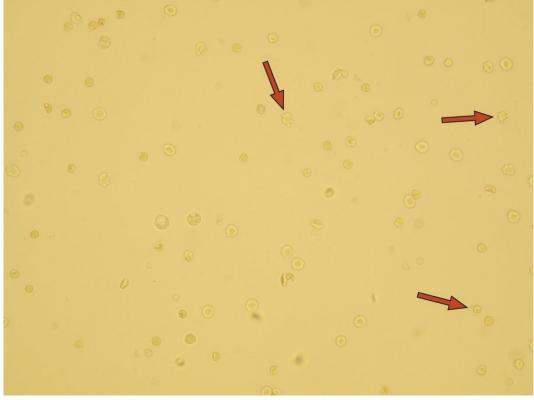
Erythrocytes



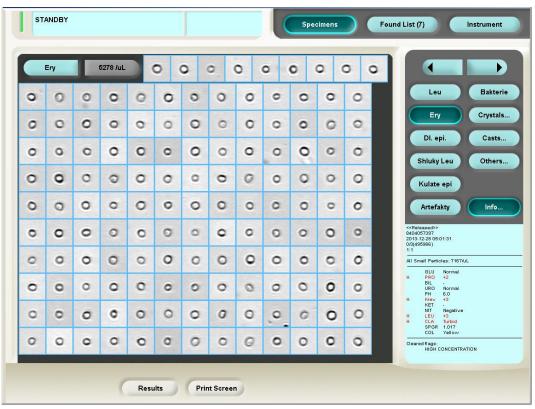
Erythrocytes deformed by high osmolality (the cells lose water)



Dysmorphic cells – codocytes



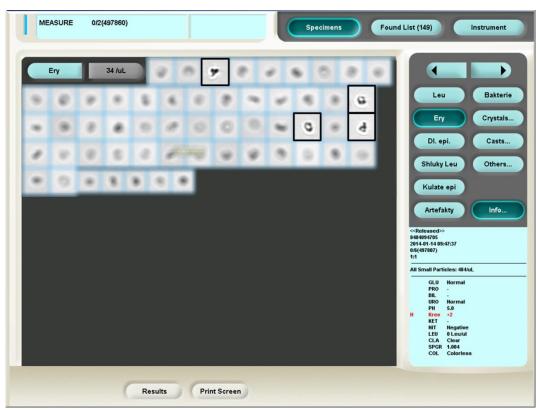
**Dysmorphic erythrocytes – acanthocytes** 



Erythrocytes

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Erythrocytes deformed by high osmolality (the cells lose water)



**Dysmorphic erythrocytes** 

# Leukocytes

**Neutrophil granulocytes** are the most common leukocyte subcategory in urine. Their cells are round shaped with the size of 10–12  $\mu$ m and with segmented nucleus in the center of the cell. The leukocyte nucleus may or may not be stained by the dye – vital leukocytes with undamaged membrane have colorless nucleus, cells with damaged membrane have their nucleus stained blue.

Other leukocyte types in urine such as **lymphocytes** (they have a large nucleus that fills almost the entire cell), **monocytes** (with nucleus in the shape of a horseshoe or a bean) and activated monocytes called **macrophages** can be rarely found. Diagnostic strip doesn't react with these leukocytes.

The granulocyte presence is typical especially for bacterial infections of urinary tract or kidneys. Semiquantitative detection with diagnostic strip is based on reaction with granulocyte esterase.

The presence of increased numbers of lymphocytes after renal transplantation is an important sign of kidney rejection.

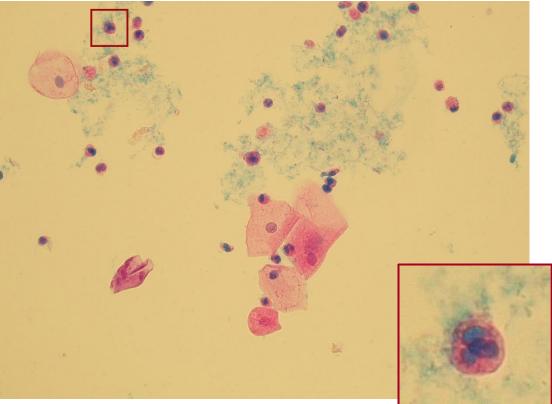
#### Macrophages

Macrophages play important role in immune reaction. Their primary function is phagocytosis – absorption of elements inside their cells. They belong among mononuclear leukocytes, meaning they have just one non-segmented nucleus. They evolve from monocytes in tissues. The macrophages have increased amount of lysosomes and vacualized cytoplasm. They may be seen with phagocyted erythrocytes (erytrophages), lipid droplets (lipophages) or crystals.

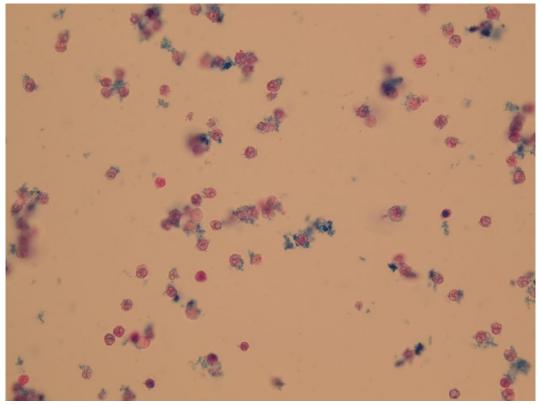
#### Glitter cells

Some leukocytes are in hypotonic urine particularly distinguishable by the Brownian movement of granules inside their cells. This gave these neutrophil granulocytes the name "glitter cells". In some cases, especially in hypotonic urine, the leukocyte membrane may rupture and spill some of the cytoplasm outside of cell. We may observe this in samples of patients with interstitial nephritis.

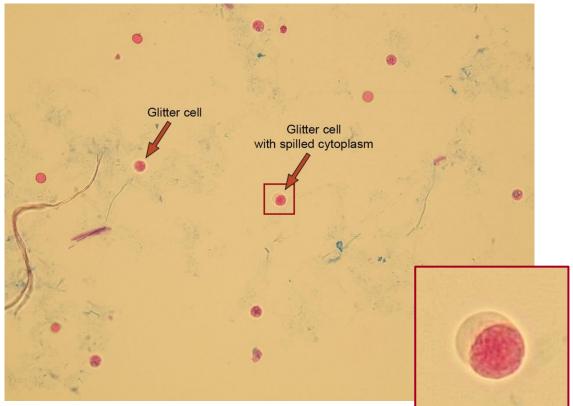
## Stained sediment



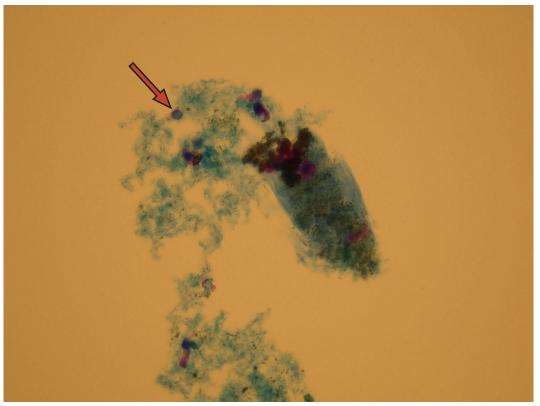
Leukocytes (granulocytes)



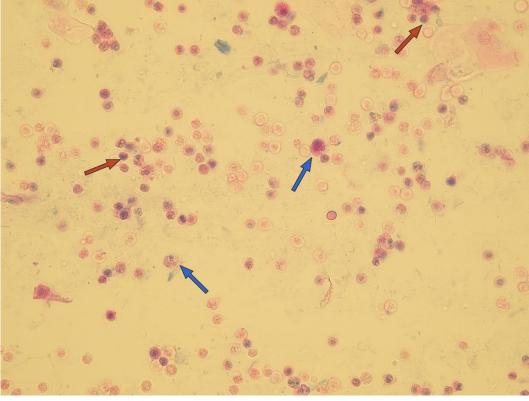
Leukocytes (granulocytes)



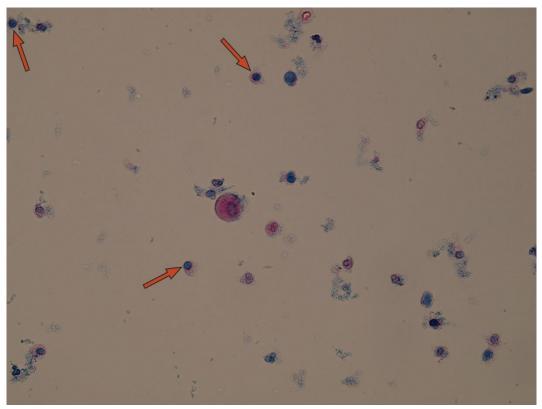
Granulocytes – glitter cells



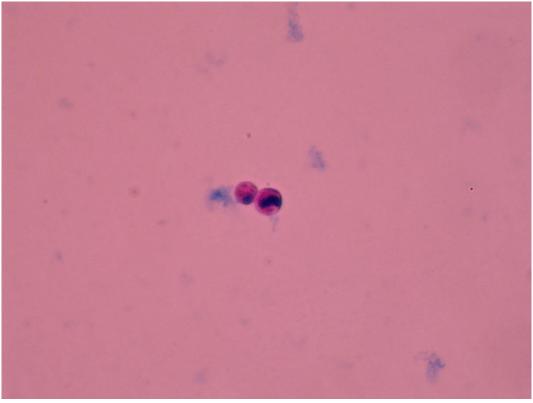
Leukocyte (lymphocyte)



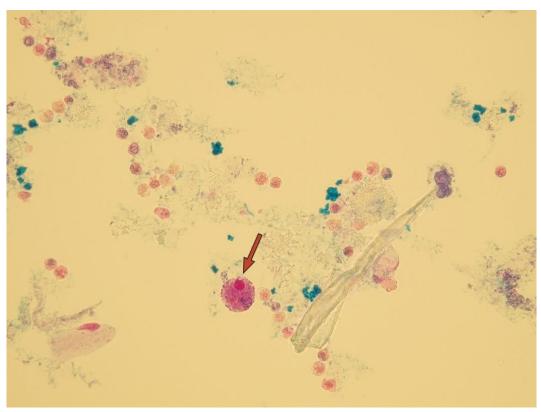
Monocytes (orange arrows) and activated monocytes (blue arrows)



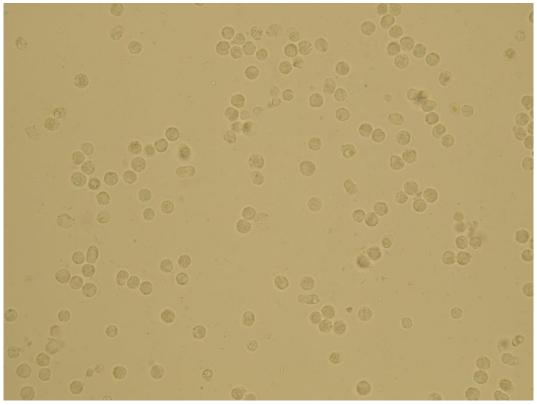
Leukocytes (lymphocytes – arrows)



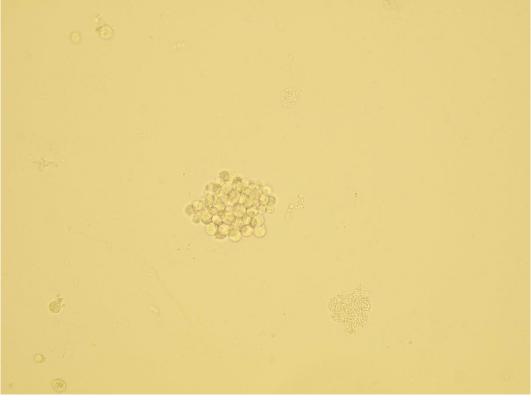
Leukocytes (monocytes), 1000× magnification



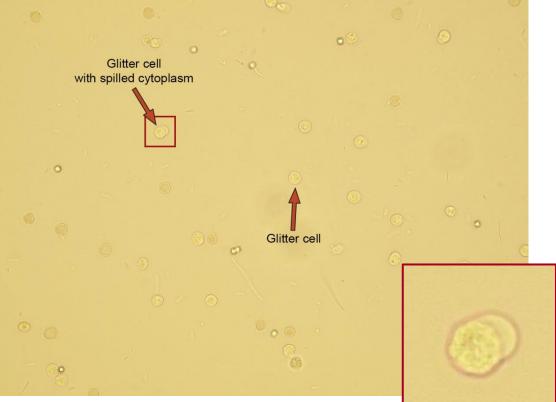
Leukocytes including macrophage with phagocyted bacteria (arrow)



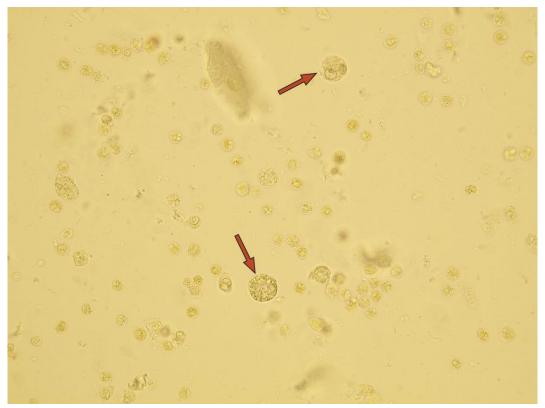
Leukocytes



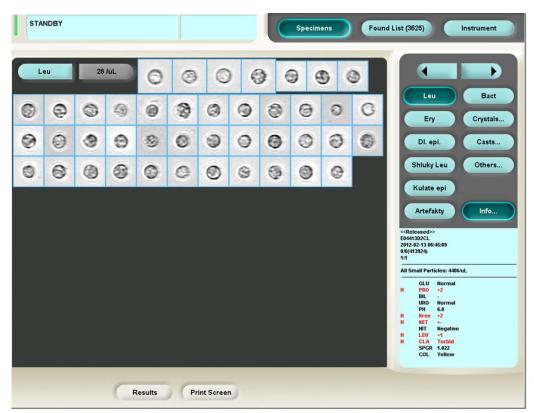
Group of leukocytes



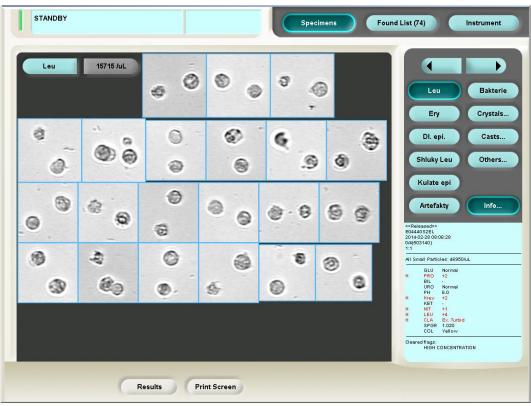
Granulocytes – glitter cells



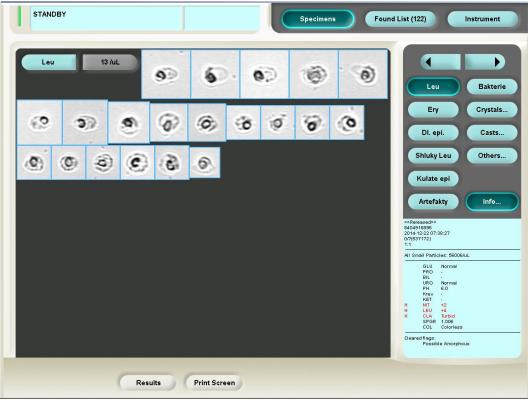
Leukocytes including macrophages (arrows)



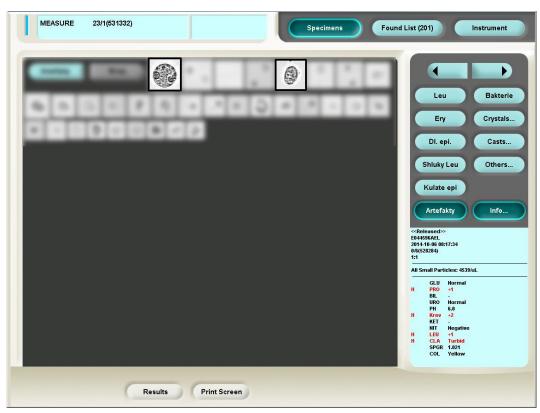
Leukocytes (granulocytes)



Leukocytes (monocytes and granulocytes)



Leukocytes (lymphocytes)



Macrophages

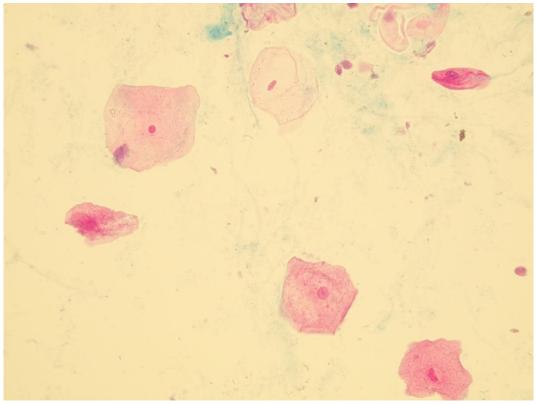
# **Epithelial cells**

The outside or the inside of the organism surface is covered with epithelial cells. These cells can be found in urine and divided in several groups.

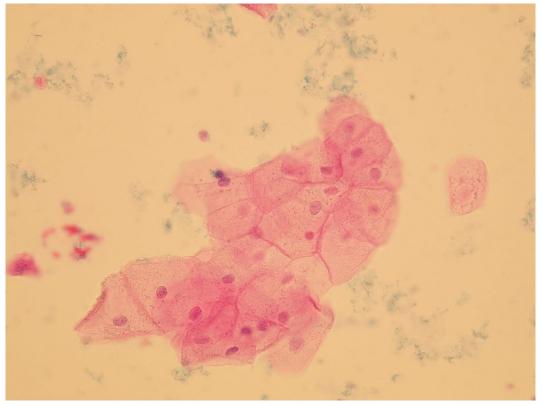
## Squamous epithelial cells

These are very large unevenly shaped cells with easily visible nucleus inside. They originate from urethra or vagina. They are very common elements with minimal clinical impact.

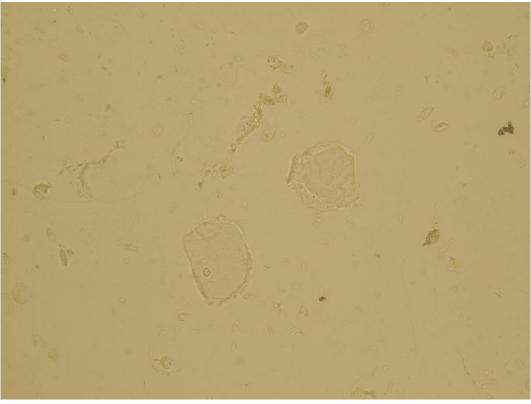
## Stained sediment



Squamous epithelial cells



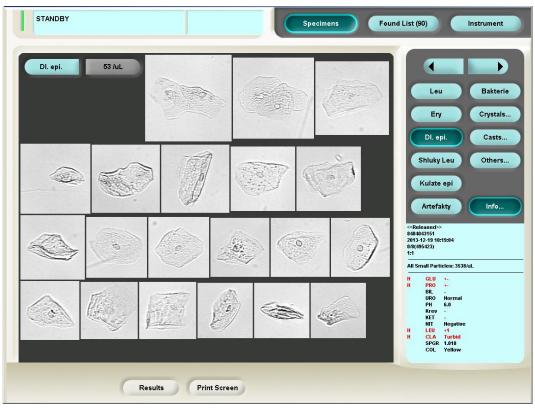
Squamous epithelial cells



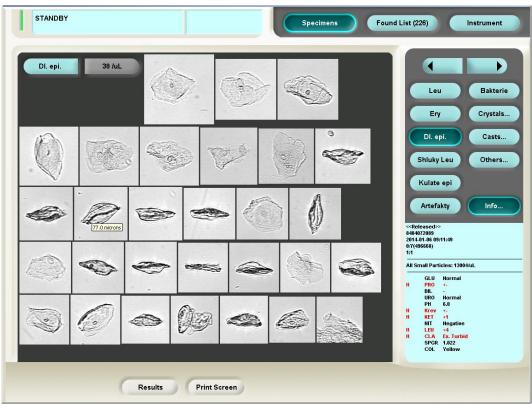
Squamous epithelial cells



Squamous epithelial cells



#### Squamous epithelial cells



Squamous epithelial cells

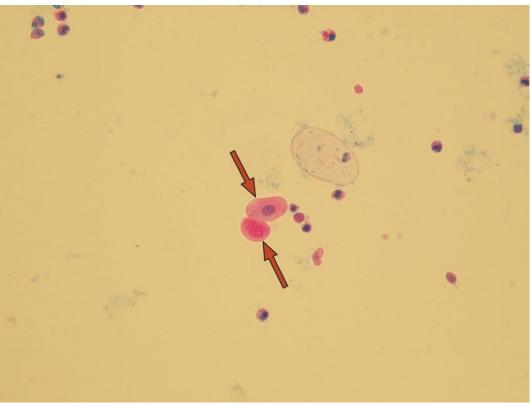
## Transitional epithelial cells

These epithelial cells have different shapes and sizes depending on their origin. Round epithelial cells are most common. Their nucleus is in the middle of the cell, they are smaller than squamous epithelial cells and they come from the bladder or proximal segments of urethra in men. If they originate from deeper layers of epithelia or near the renal pelvis, they are smaller and more round.

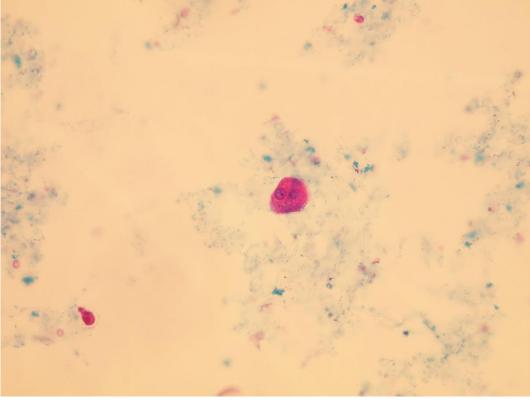
Limited amount of round transitional epithelial cells may be normal, large amount accounts to urinary tract infection.

Another subcategory is called caudate cells. They come from deep layers of a bladder. The cells with two nuclei are also categorized as transitional epithelial cells. Large number of cells with two nuclei or asymmetric cells can be found in urine from patients with transitional cell (urothelial) carcinomas.

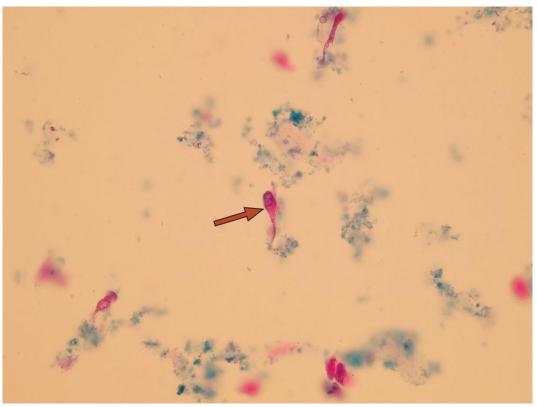
#### Stained sediment



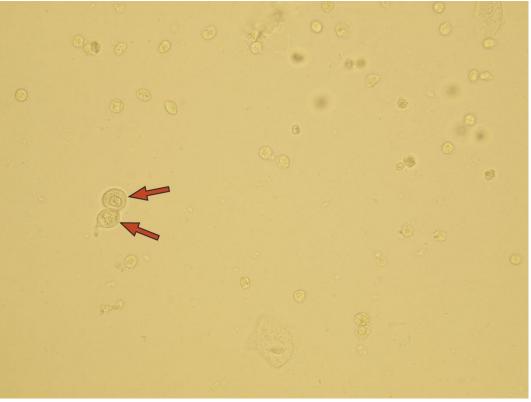
**Transitional epithelial cells** 



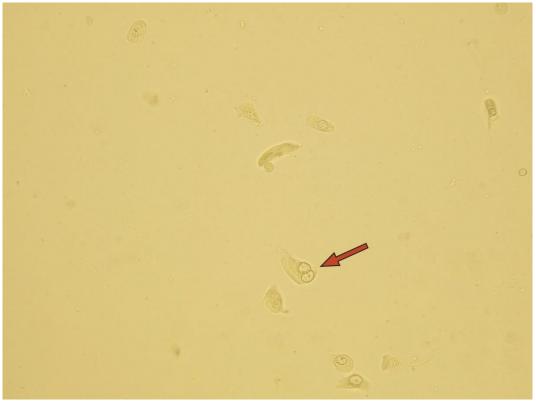
Transitional epithelial cells with two nuclei



Caudate transitional epithelial cells



Transitional epithelial cells

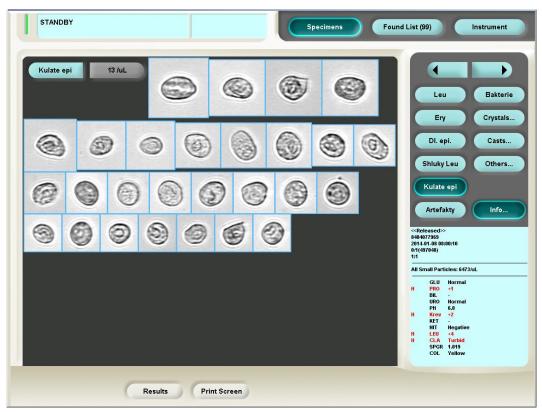


Transitional epithelial cells with two nuclei



Caudate transitional epithelial cell

Pictures from iQ 200 analyzer (IRIS)



**Transitional epithelial cells** 

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Transitional epithelial cells with two nuclei

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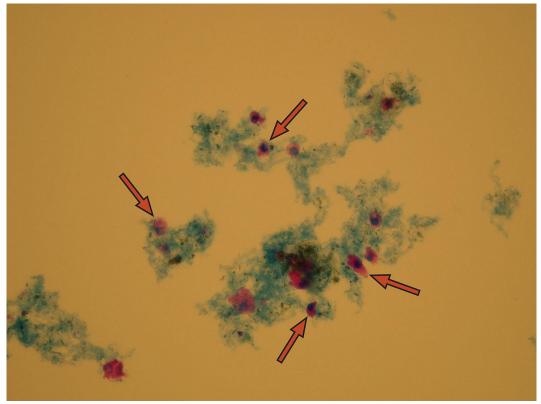
Caudate transitional epithelial cells

## Renal epithelial cells

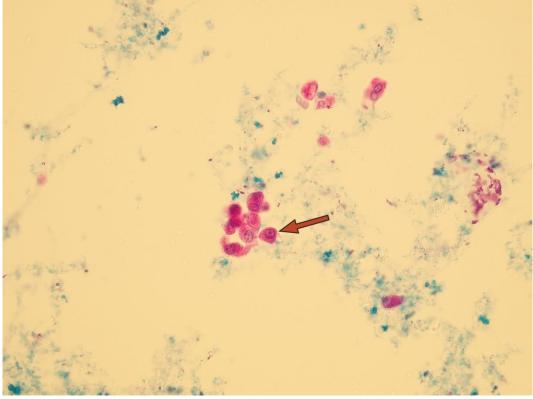
These cells have polyedric shape with non-segmented eccentric nucleus. They are the smallest epithelial cells, approximately twice the size of a leukocyte. They don't absorb water and swell, but keep their polyedric shape. Proximal tubular cells have granulated cytoplasm and sometimes may appear as small or fragmented granular casts. They are clinically significant elements in urine in cases of acute tubular necrosis or viral infection and drug or heavy metal toxicity.

**Renal epithelial fragments** constitute of several renal cells of collecting duct origin. Their presence in urine is considered to be clinically severe and indicates heavy renal tubular damage.

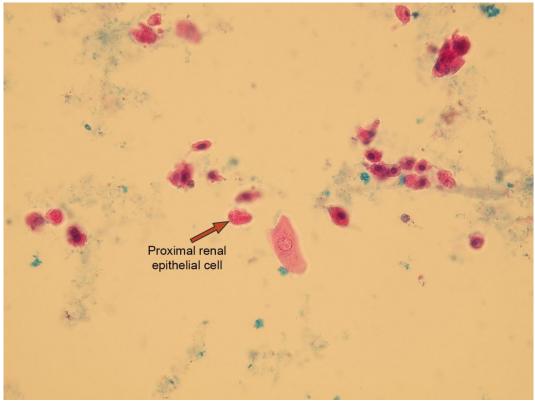
#### Stained sediment



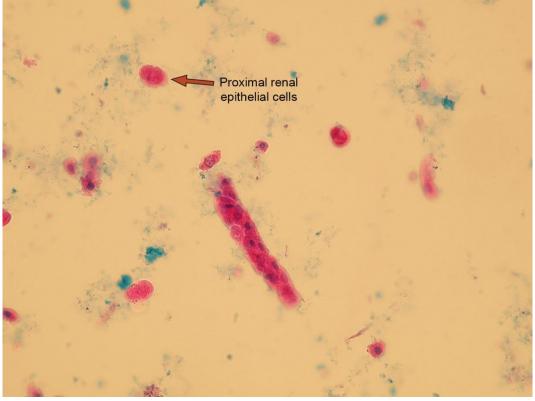
**Renal epithelial cells** 



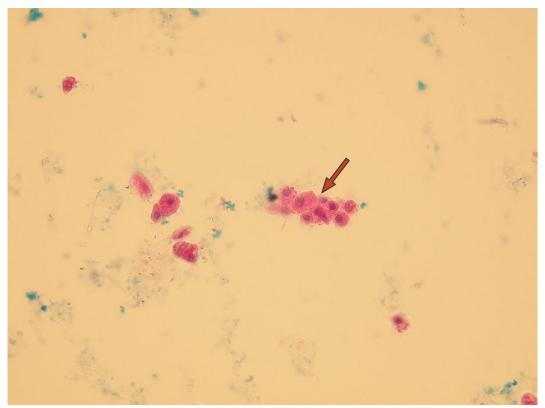
Renal epithelial cells



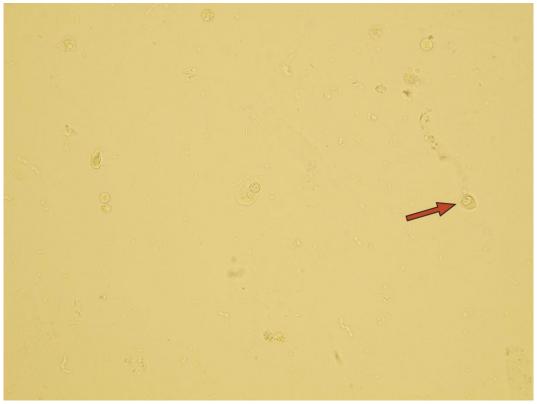
Renal tubular epithelia



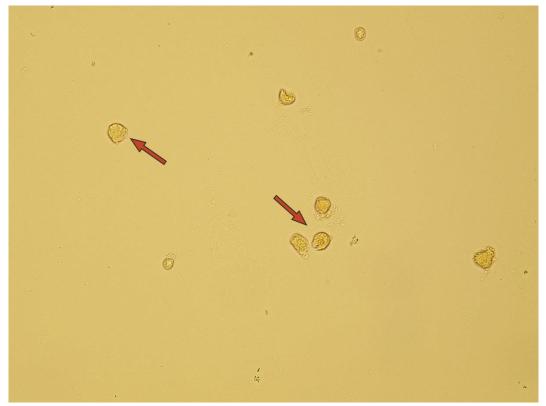
Renal tubular epithelia



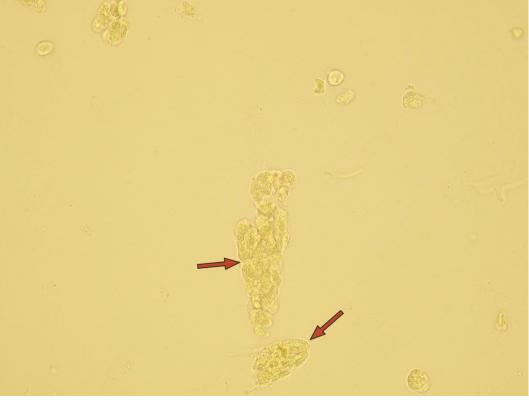
Fragments of renal tubular epithelia



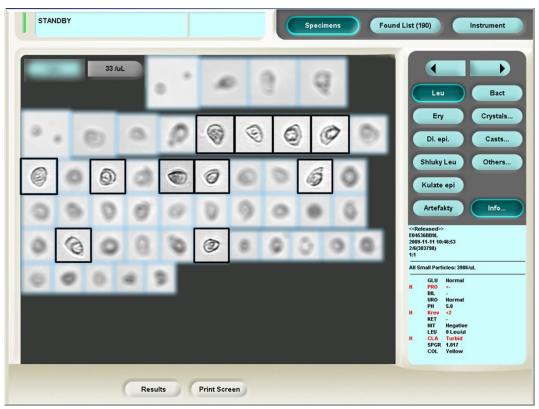
Renal epithelial cells



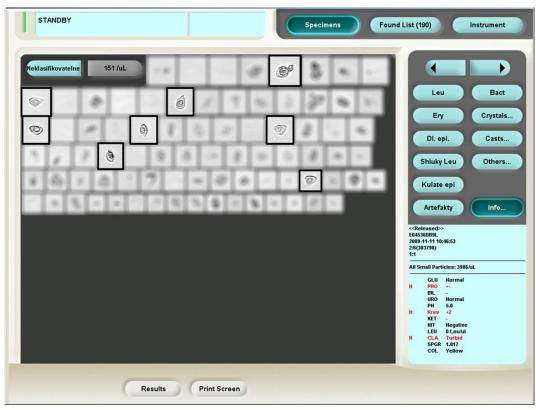
Renal tubular epithelia probably from proximal tubules



Fragments of renal tubular epithelia



#### Renal tubular epithelia



Renal tubular epithelia

# Casts

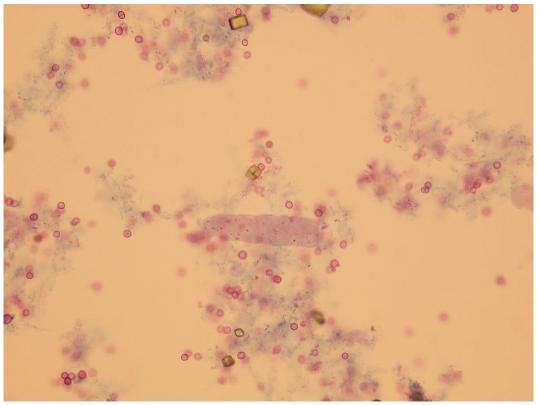
These elements are formed in the kidney tubules by Tamm-Horsfall mucoprotein precipitation. The mucoprotein is secreted from renal tubule cells. Their formation is reinforced by acidic pH in urine, higher concentration of plasmatic proteins, dehydration and excessive physical activity. Their shape copies the shape of a tubule with defined outer line, parallel sides and round ends.

We distinguish hyaline, cellular, granular, wax, lipid, bacterial and combined casts. The cast is classified as cellular or granular cast only if the amount of material inside takes up to 1/3 of its volume. Otherwise, it is called hyaline cast. The cast goes through different stages of development with increasing time in the kidney tubule: cell cast  $\rightarrow$  granular cast  $\rightarrow$  waxy cast.

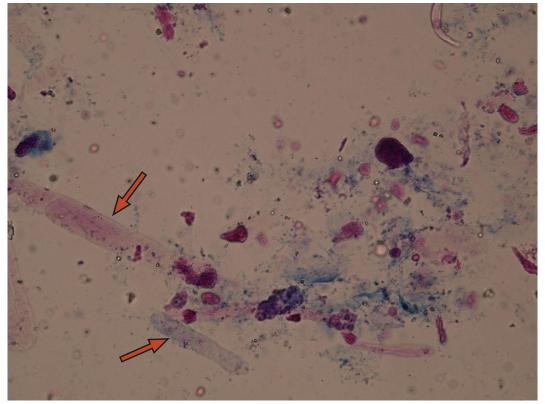
### Hyaline casts

Hyaline casts are formed only by Tamm-Horsfall glycoprotein without any other elements or their fragments inside. Due to their composition, they are almost undetectable in native sediment.

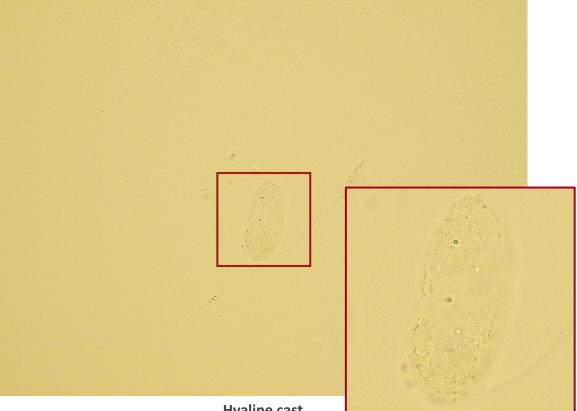
# Stained sediment



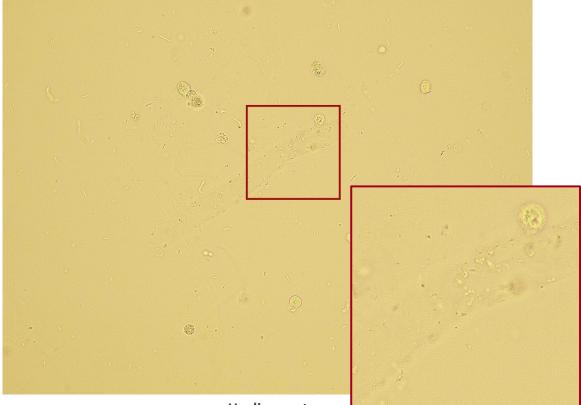
Hyaline cast



Hyaline casts



Hyaline cast



Hyaline cast

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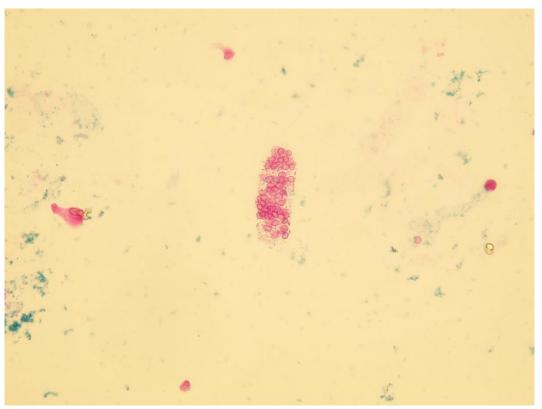
#### Hyaline casts

STANDBY		Specimens F	ound List (90) Instrument
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			Hyal. valce RBCT Granulov. val. Leu. valce Bunecne val. EPIC
	Results Print Screen		Vosk. valce BROAD Ostatni valce

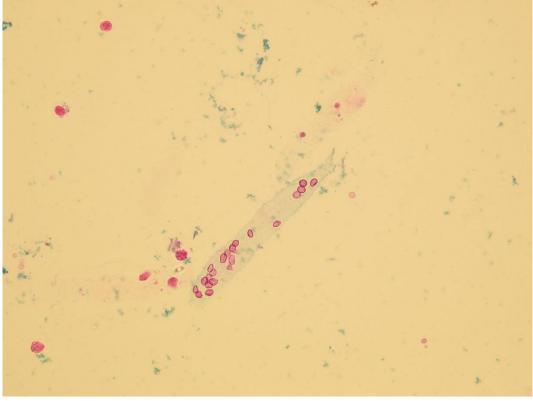
Hyaline cast

## Cell casts

Cellular casts comprise of cells that may occur in renal tubules (leukocytes, erythrocytes and tubular epithelia) entrapped in Tamm-Horsfall mucoprotein matrix. We recognize leukocyte casts, erythrocyte casts and renal tubular epithelial cell casts. In some cases, the cells in the cast cannot be accurately determined and the cast is therefore categorized as cellular.



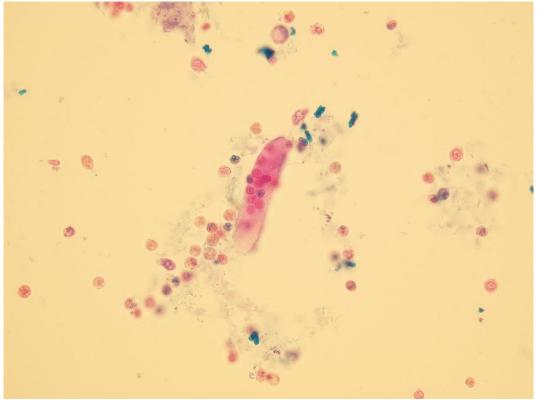
Erythrocyte cast



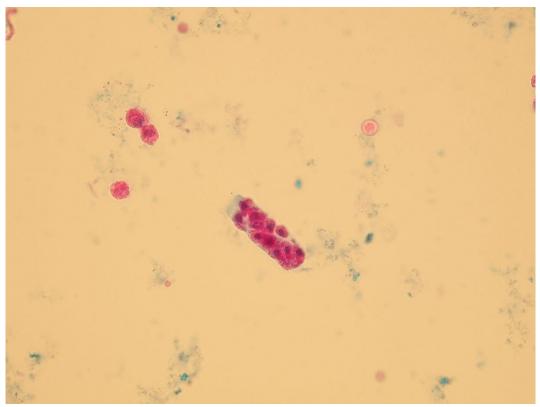
Hyaline cast with erythrocytes



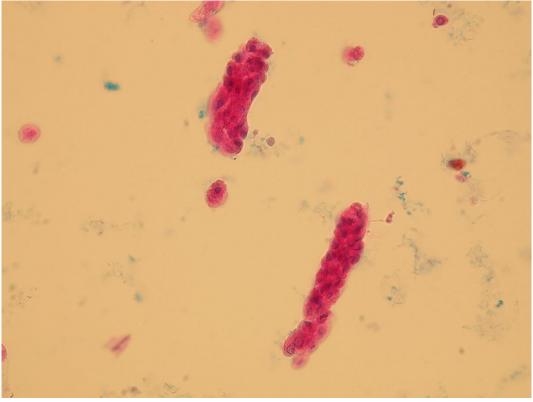
Leukocyte cast



Hyaline cast with leukocytes inside



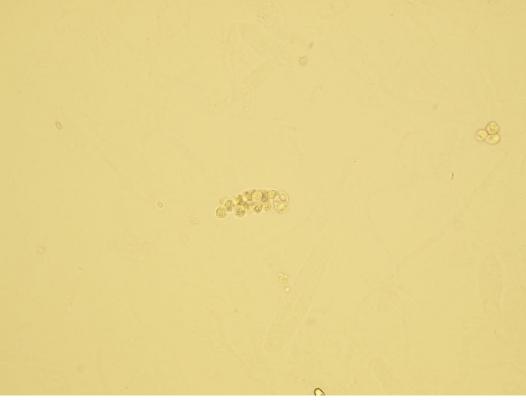
Renal epithelial cell cast



Renal epithelial cell casts



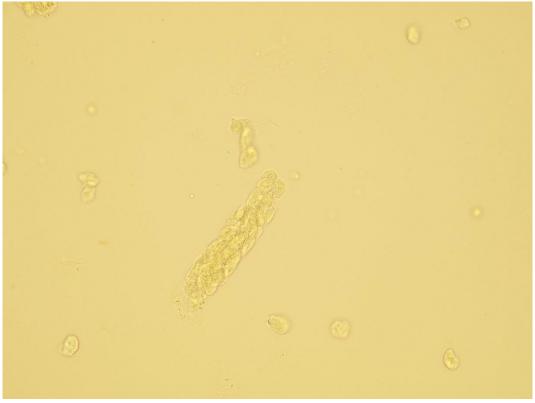
Erythrocyte cast



Leukocyte cast

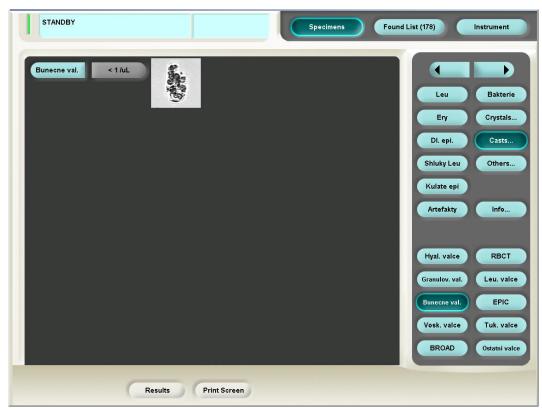


Renal epithelial cell cast

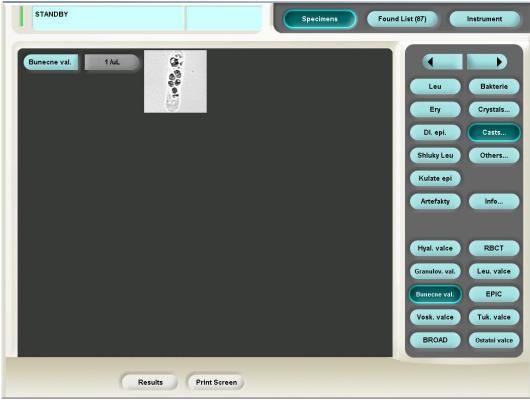


Renal epithelial cell cast

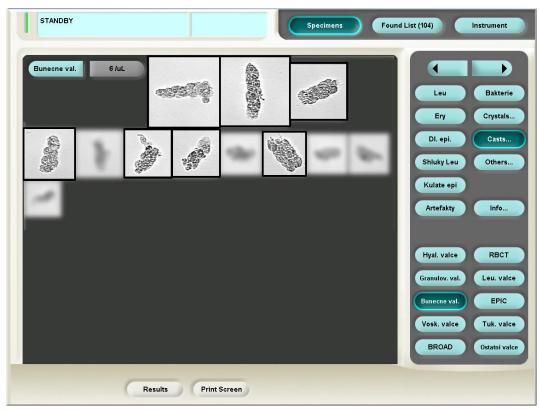
Pictures from iQ 200 analyzer (IRIS)



Erythrocyte cast



Leukocyte cast



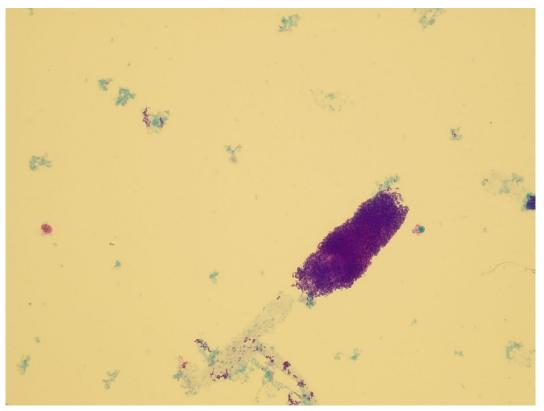
**Renal epithelial cast** 

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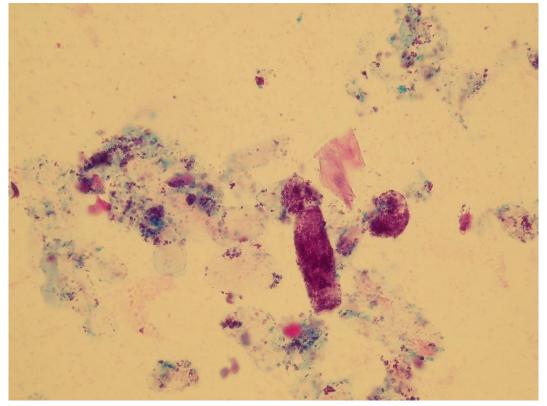
**Renal epithelial cast** 

#### Granular casts

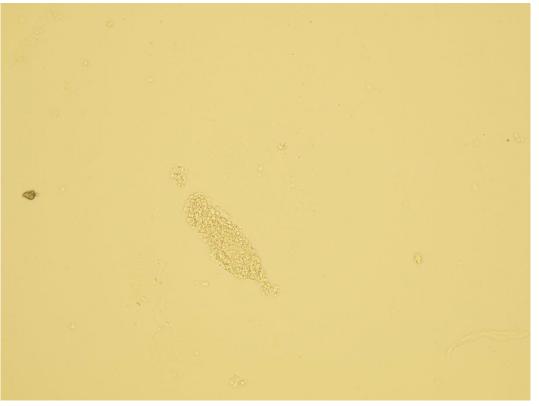
Granules inside these casts are formed after decomposition of cells in the cast or a tubule. Granular casts may vary from coarsely granular including cell particles to finely granular that are turning to waxy casts. Small number of these casts may occur after intensive physical activities (patients who were exposed to cold conditions or cold hardening). Increased concentration of granular casts is strongly pathological.



Granular cast



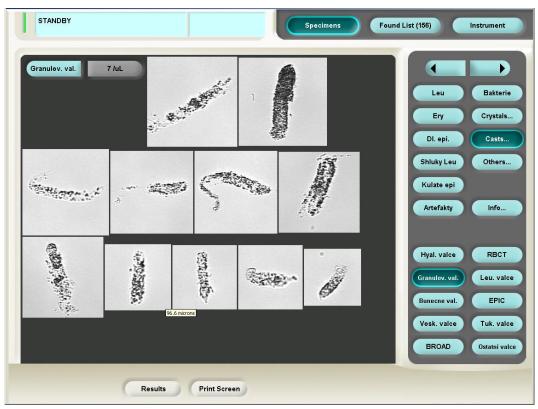
Granular cast



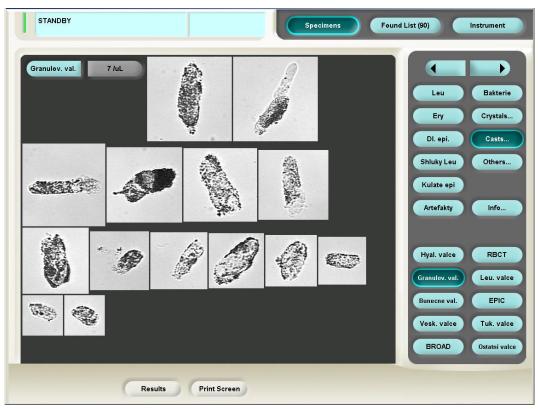
Granular cast



Granular cast



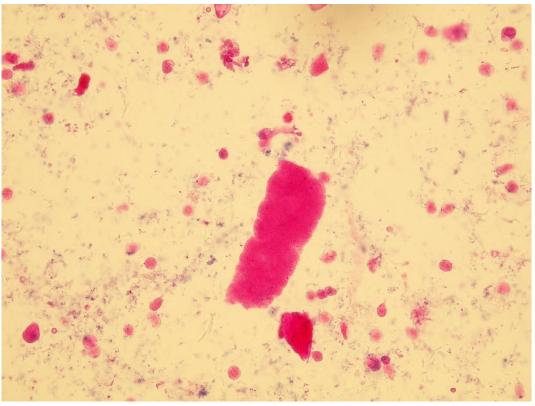
**Granular casts** 



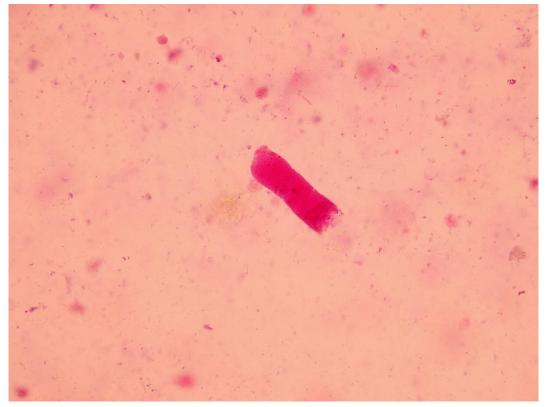
**Granular casts** 

#### Waxy casts

Waxy casts are the clinically most serious type of casts and they are also called the casts of renal failure. They occur in patients with chronic kidney diseases. Their structure is homogenous, they have the biggest size and their endings are often broken. Sometimes they are partially made of granular matter. They indicate tubule damage.



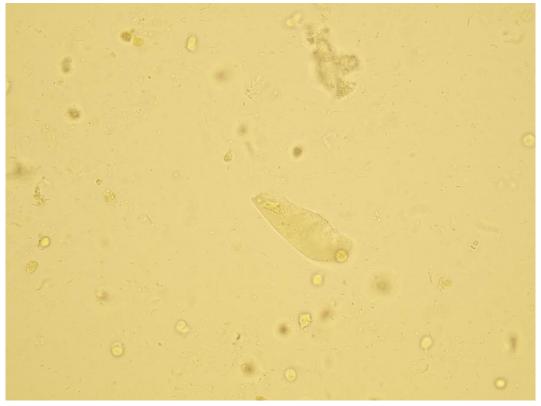
Waxy cast



Waxy cast



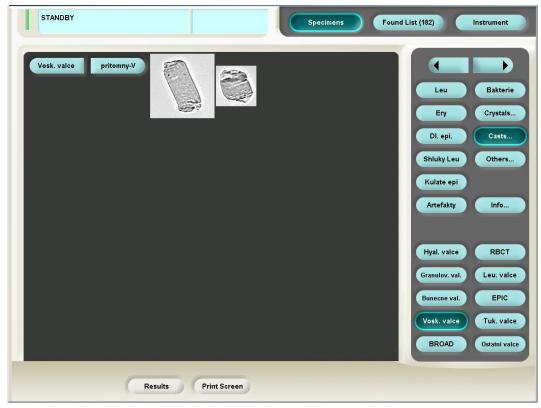
Waxy cast



Waxy cast

STANDBY			Specimens	Found List (114)	Instrument
Vosk. valce prit	tommy-V			Control of the second s	eu Others api ty Info lee RBCT val. Leu. valce val. EPIC lee Tuk. valce
	Results Print S	creen			

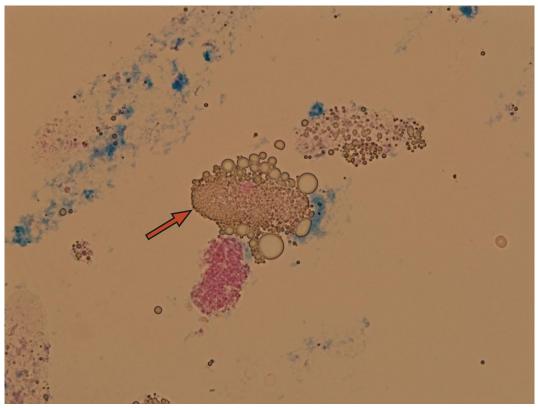
Waxy casts



Waxy casts

## Fatty casts

Fatty casts in protein matrix contain fat inclusions. They are related to strong insufficiency, nephritic syndrome, diabetics and mercury intoxication.



Fatty cast

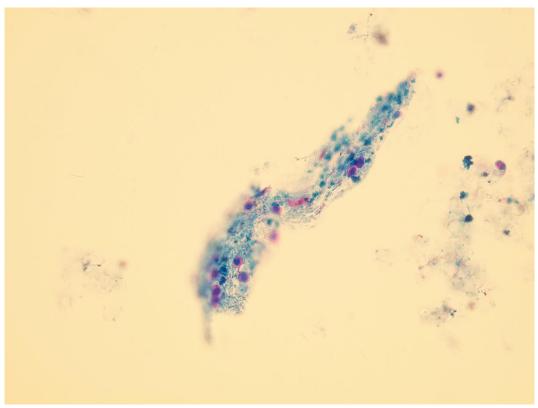
STANDBY		Specimens	Found List (123) Instrument
2 /uL			Leu Bact Ery Crystals DI. epi. Casts Shluky Leu Others Kulate epi Artefakty Info Hyal. valce RBCT Groudower vite Leu. valec CELL EPIC WAXY FATC BROAD Ostatni valce
0	Results Print Screen		

Fatty casts

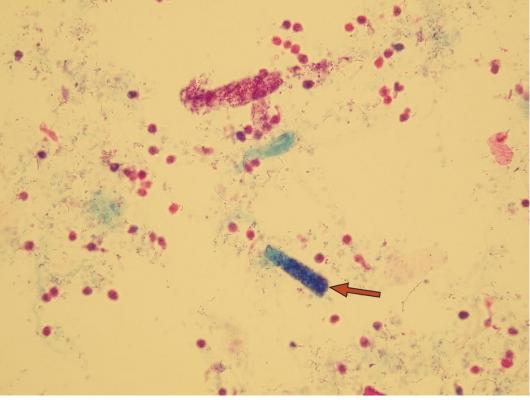
### **Bacterial casts**

Bacterial casts are composed of bacteria in a protein matrix. They may be found in acute pyelonephritis or intrinsic renal infection. Bacterial casts should be seen in association with loose bacteria, leukocytes, and leukocyte casts. Their occurrence is extremely rare, due to their fragility and also commonly used antibiotic treatment.

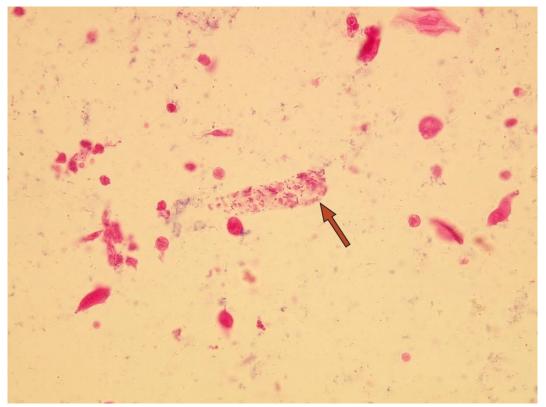
#### Stained sediment



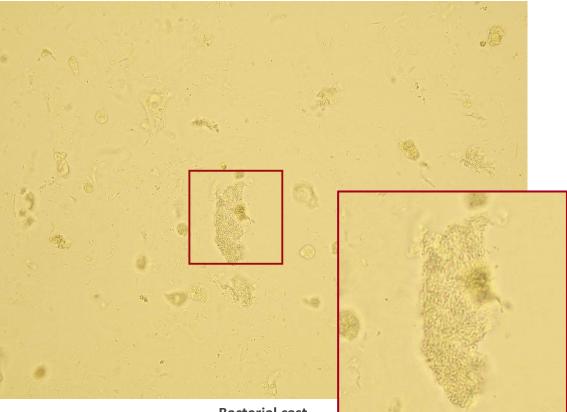
**Bacterial cast** 



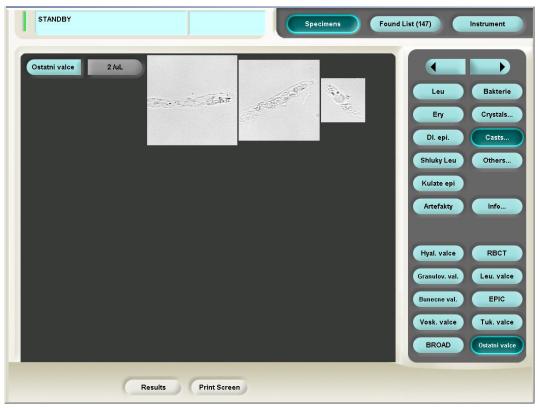
**Bacterial cast** 



**Bacterial cast** 



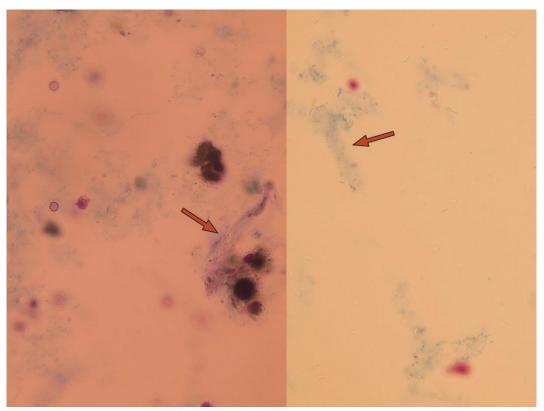
**Bacterial cast** 



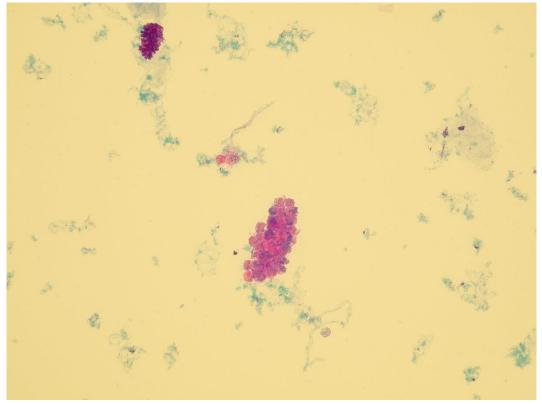
**Bacterial casts** 

#### Pseudocasts

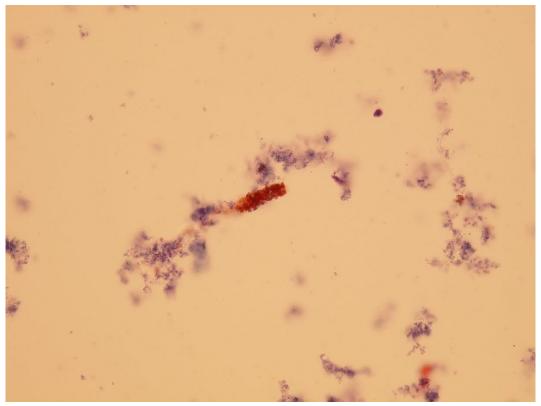
Pseudocasts are structures of aggregates that resemble and may be mistaken for casts because of their shape. They are without diagnostic significance. Such structures include mucus threads, leukocytes entrapped in mucus, rolled squamous epithelial cells, aggregates of amorphous urates, calcium oxalate crystals and so on. Artifacts don't belong in this category.



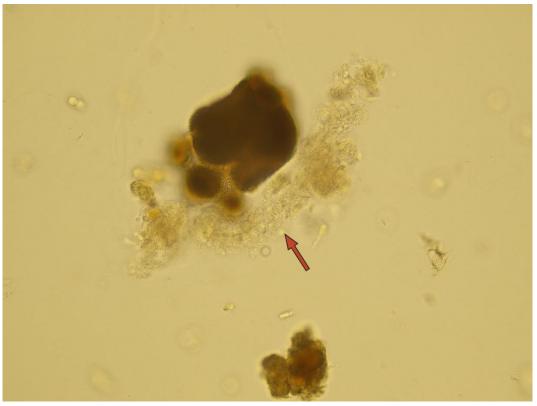
Pseudocasts – mucus



Pseudocasts – group of leukocytes



Pseudocast – bilirubin crystals



Pseudocast – ammonium urate crystals (arrow)

STANDBY		Specimens	Found List (150) Instrument
Artefakty 1 Jul			Leu Bakterie Ery Crystals Dl. epi. Casts Shluky Leu Others Kulate epi Artefakty Info *Reisserd>* #0498977 2055-04 07(5-4022) 11 Al Small Particles: 1392/uL GLU Normal H PRO *- BIL URO Normal H PRO *- BIL NORMON NORMON N
C	Results Print Screen		

Pseudocasts – mucus

eklasifikovate	ine 1420 <i>i</i>	uL ,	No.				Leu	Bakter
		all the second	·	No.	- 		Ery DI. epi.	Crystals Casts
	-				Wi Wan	*	Shluky Leu Kulate epi Artefakty	Others
*	Sec.	Section of the sectio	ALC: NOT	A.	New York	÷4	<	
			and the second			"你能够。"	All Small Particles: 28014 GLU Normal H PRO +1 BIL - H URD +1 H VRO +1 Krev -	uL
		9	AND STORE	e forme		New York	NIT Negative H CLA Ex. Tube SPOR 10-12 Cleared tags: High Concentra	

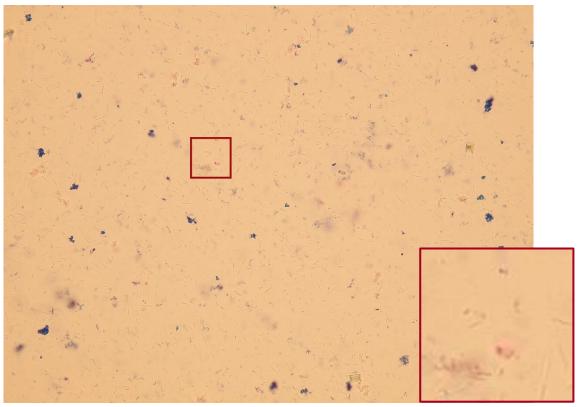
Pseudocasts – phosphate microcrystals

# **Microorganisms**

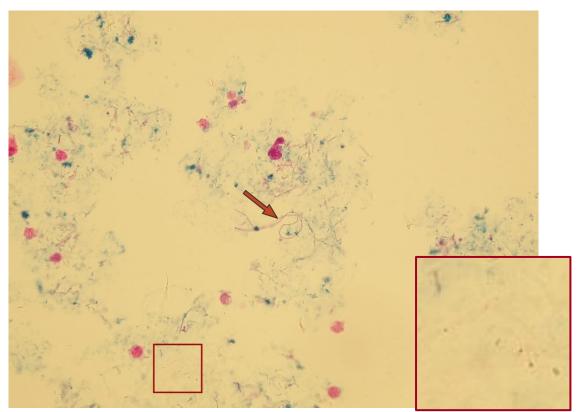
## Bacteria

Bacteria are single celled organisms. They have shapes of spheres (cocci) or rods and usually reach size of a few micrometers.

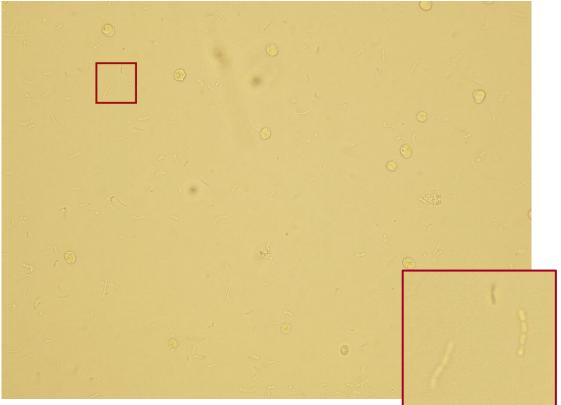
Small amount of bacteria in urine is quite common finding. Urine should be analyzed within one hour, otherwise the bacteria multiply. They tend to form chains or occur as longer fibers. Antibiotic treatment may cause bacteria cell wall disintegration producing unusually long rod-shaped elements called bacteria protoplasts. Larger quantities of bacteria can often be found in pathological urine with leukocytes.



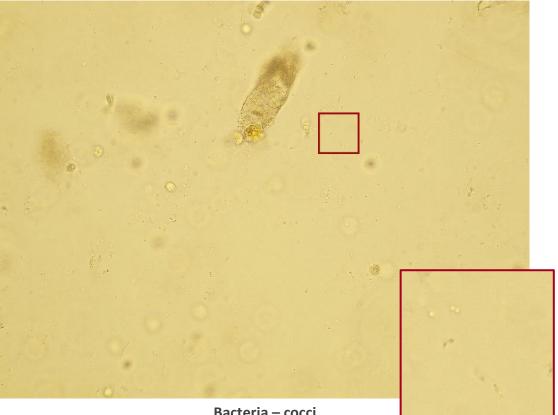
Rod-shaped bacteria that remained unstained after dyeing



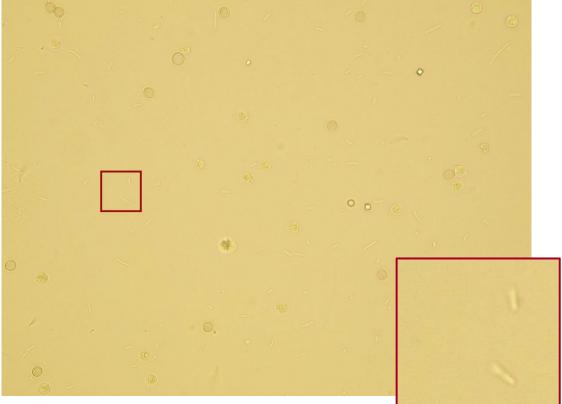
Cocci (detail) and protoplast bacteria (arrow) – stained after dyeing)



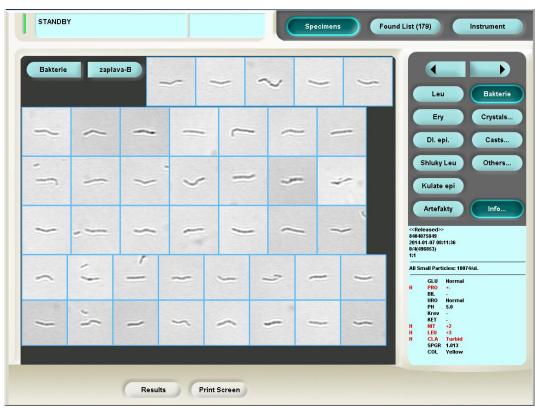
Chained bacteria – cocci



Bacteria – cocci



Bacteria – rods





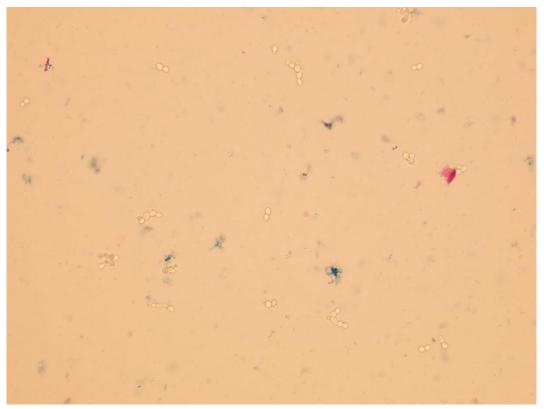
STANDBY	Specimens	Found List (147) Instrument
Neklasifikovatelne 420 /uL	•	Leu Bakterie Ery Crystals Dl. epi. Casts Shluky Leu Others Kulate epi Artefakty Info
		<:Released>>> 8404134877 2014.04.30 082/3149 18(499795) 11 All Small Particles: 18547/uL
		H GLU +3 H PRO +- BL URO Normal PH 5.0 Krev - KET KET NIT Negative H ELU +4 H CLA Turbid SPGR 1,220 COL Yellow
Results	Print Screen	

Fibers of bacteria; single cocci around

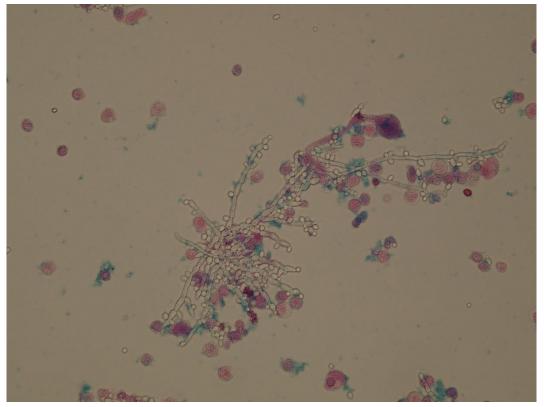
#### Yeast

Yeasts are quite common pathological finding. They are unicellular microorganisms with typical round or oval shape. They multiply by budding and in some cases they form pseudomycelium (fibrous form of yeast). They may occur in urine of immunodeficient or immunosuppressed patients and may also be present in urine of diabetics, because glucose contributes to their growth. The most common species in urine is *Candida albicans*.

# Stained sediment



Yeast

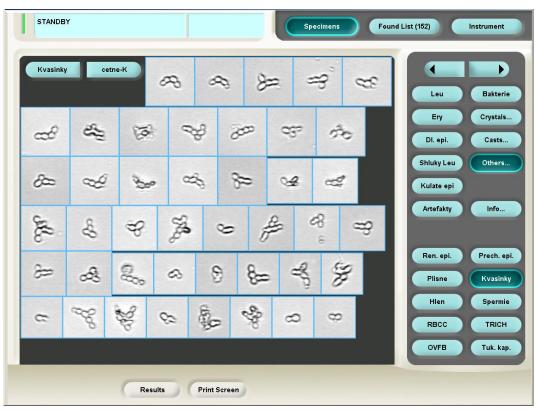


Yeast pseudomycelium

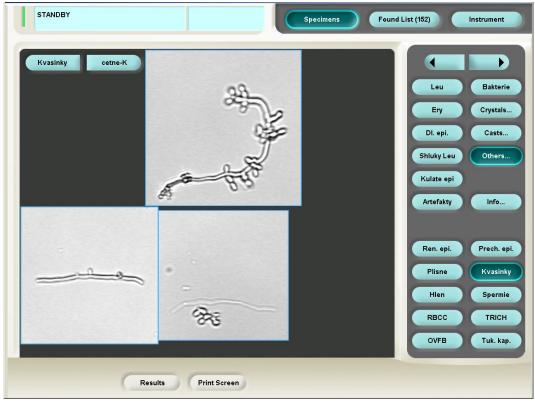
Yeast



Yeast pseudomycelium







Yeast pseudomycelium

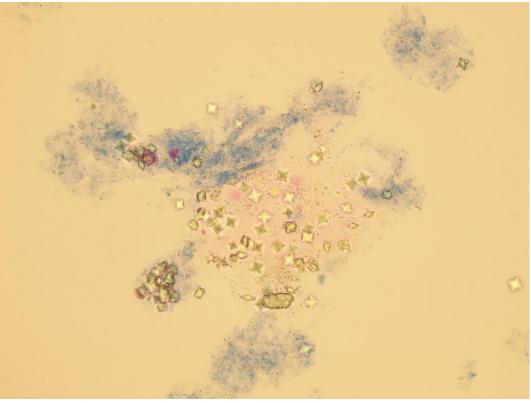
# Crystals

The presence of crystals and amorphous microcrystalline deposits in urine is not considered a significant clinical finding. However, both parameters are determined and their amount is evaluated.

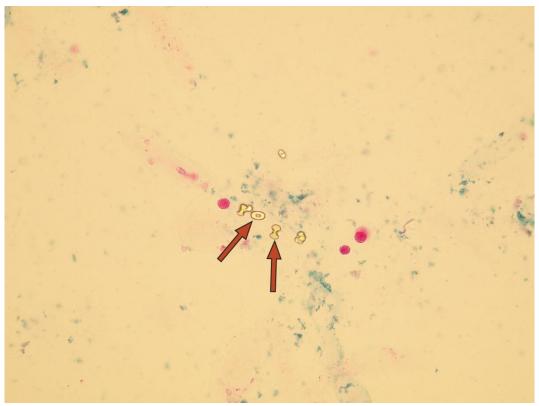
Crystals have various crystalline structure and they occur in many forms. The pH of urine is important factor for their formation and structure, although it is sometimes difficult to distinguish them even then. In that case, the elements could be classified only as crystals - without further specification.

The most frequent crystals in urine are: oxalate and uric acid (in acidic urine) or phosphate (in alkaline urine). Rarely found crystals in urine: bilirubin, cysteine, leucine, tyrosine or drug. We distinguish two types of amorphous microcrystals – amorphous urates in acidic urine and amorphous phosphates in alkaline urine.

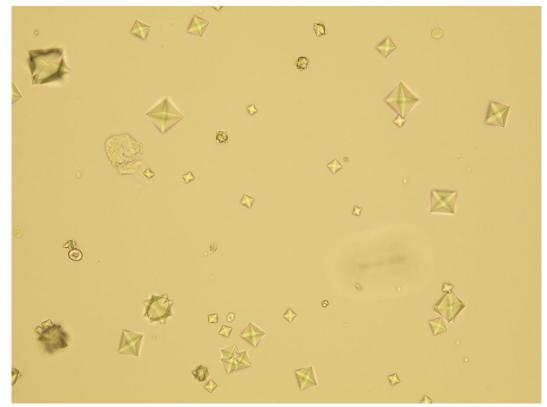
# Oxalates



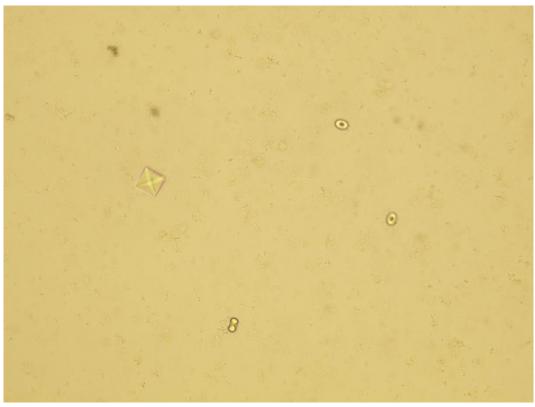
Calcium oxalate dihydrate (envelope-shaped)



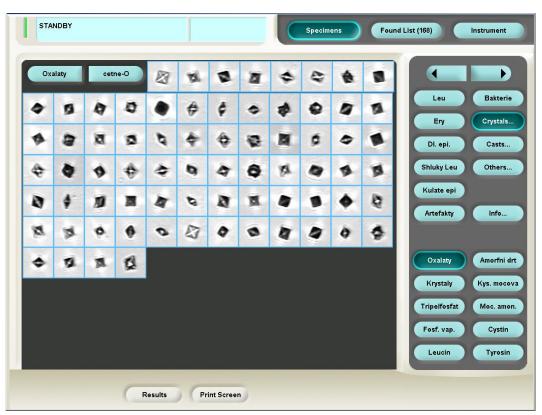
Calcium oxalate monohydrate (oval and biscuit-shaped)



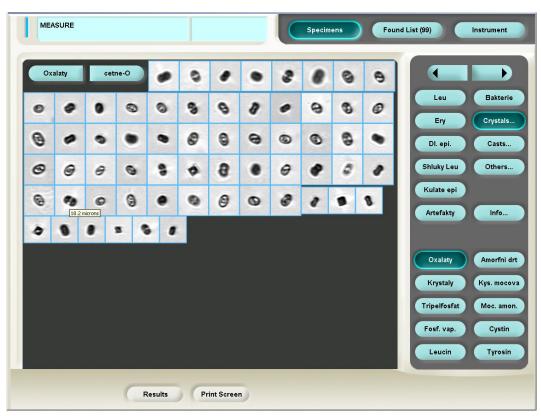
Calcium oxalate - monohydrate (oval form) and dihydrate



Calcium oxalate – monohydrate (oval form and biscuit-shaped) and dihydrate



Calcium oxalate dihydrate (envelope-shaped)



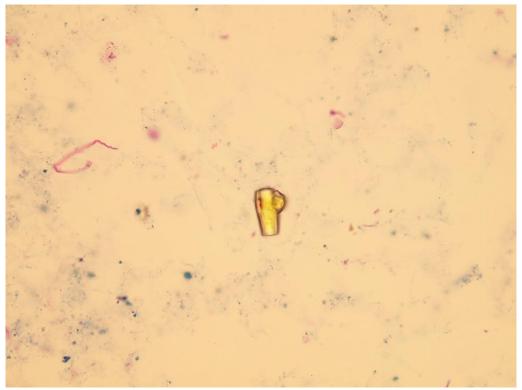
Calcium oxalate - monohydrate (oval and biscuit-shaped) and dihydrate

### Uric acid

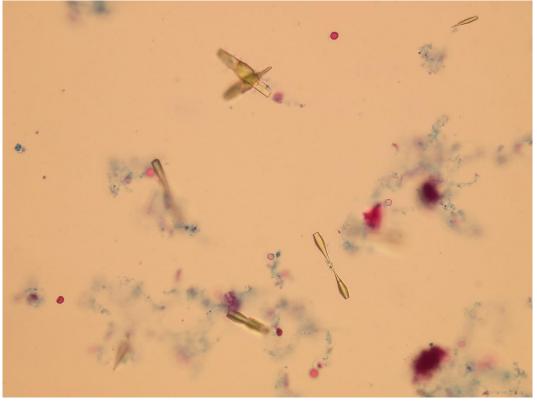
### Various forms of crystals of uric acid

0 0 0 0 0 0 Ø

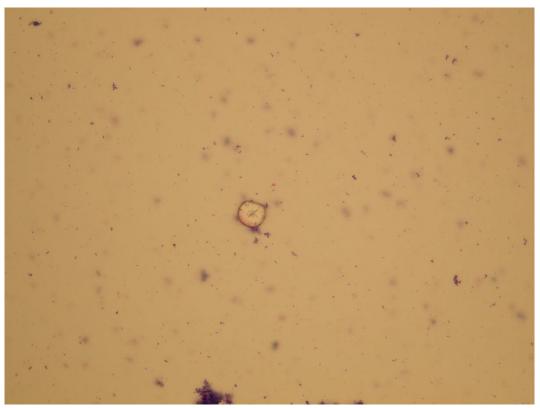
Uric acid (lemon-shaped)



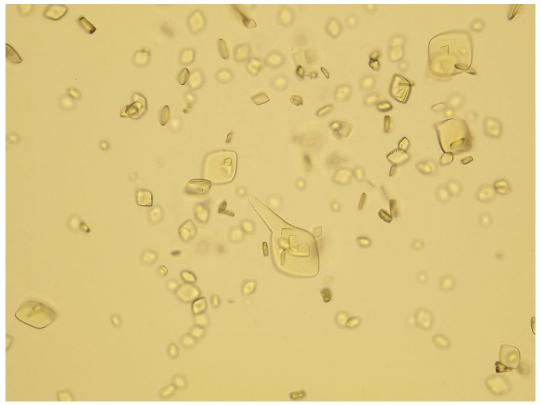
Uric acid (barrel-shaped)



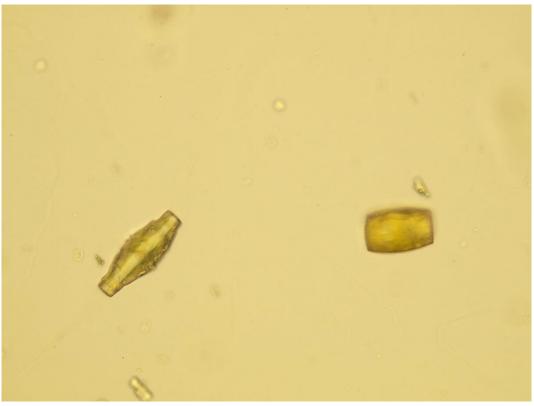
Uric acid (needle form)



Uric acid



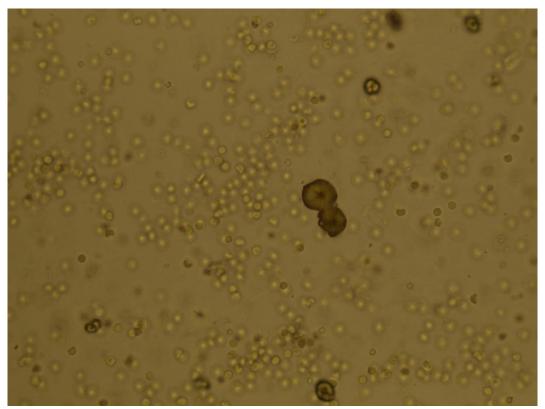
Uric acid (lemon-shaped)



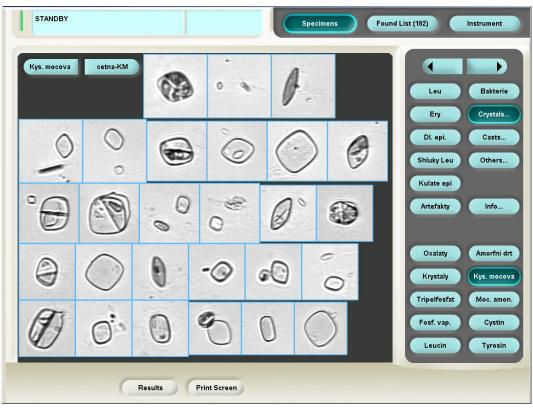
Uric acid (barrel-shaped)



Uric acid (needle form)



Uric acid



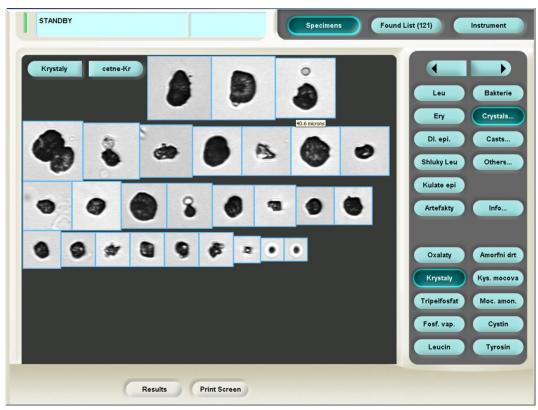
#### Uric acid (lemon-shaped)



Uric acid

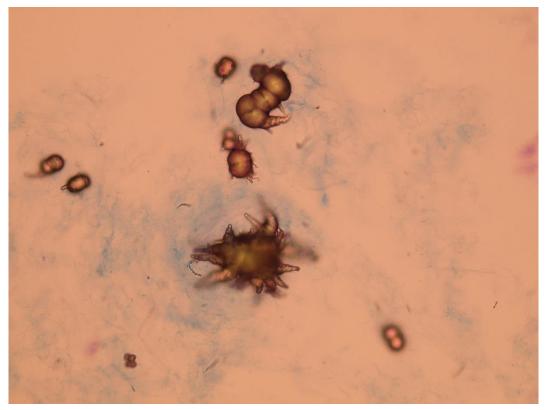
STANDBY				ipecimens Fo	und List (114) Instrument
Kys. mocova	cetna-KM	~ .		1	Leu Bakterie
				1	Ery Crystals Dl. epi. Casts
1	~	~	-	<del>e</del>	Shluky Leu Others
		1	a		Kulate epi Artefakty Info
4		*	-	0	Oxalaty Amorfni drt
-	-	~	-	-	Krystaly Kys. mocova Tripelfosfat Moc. amon.
- ·	-			1	Fosf. vap. Cystin Leucin Tyrosin
	Results	Print Screen	n		

Uric acid (needle form)

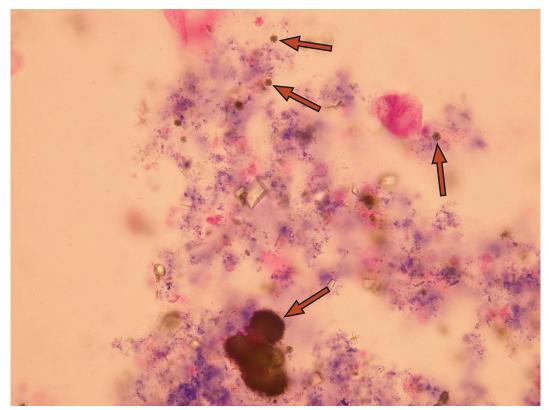


Uric acid

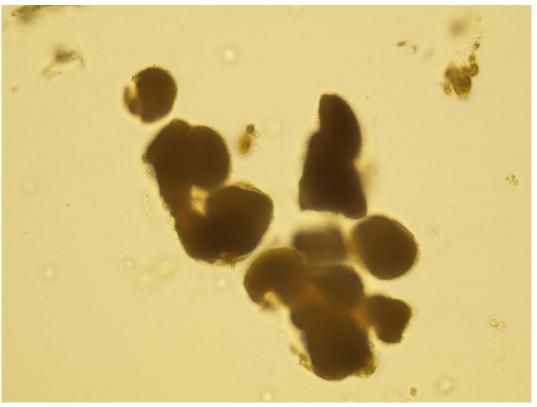
### Ammonium urate



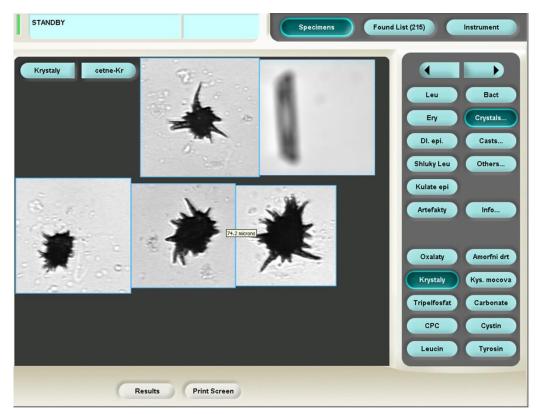
Ammonium urate



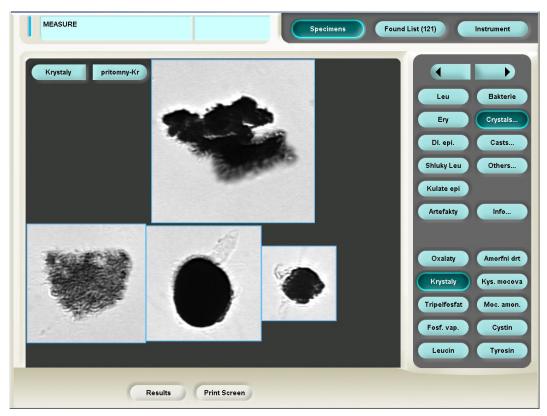
Ammonium urate



Ammonium urate



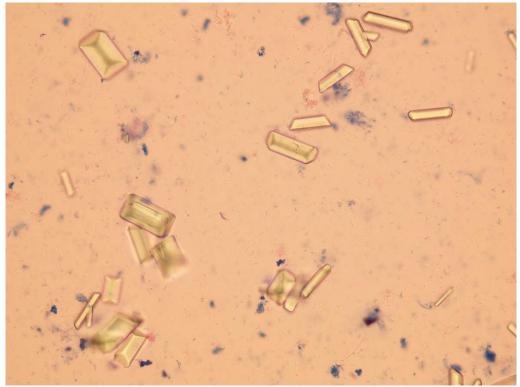
Ammonium urate



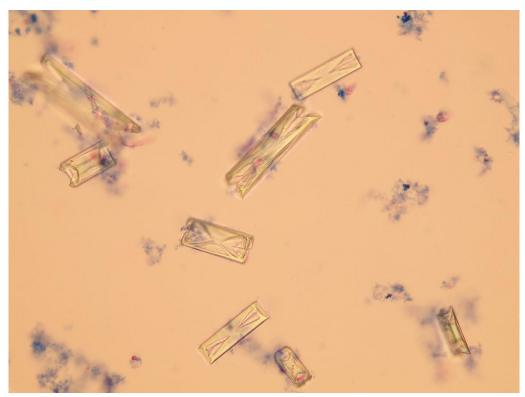
Ammonium urate

### Triple phosphate

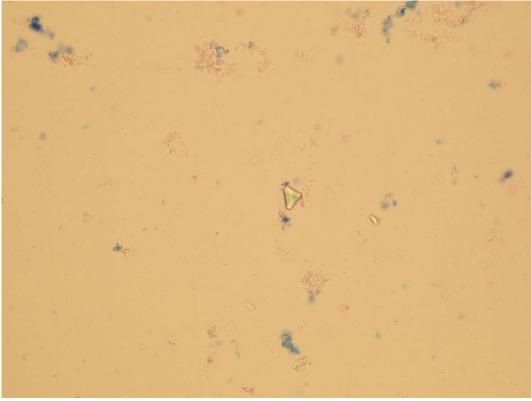
Ammonium magnesium phosphate crystals (Triple phosphate).



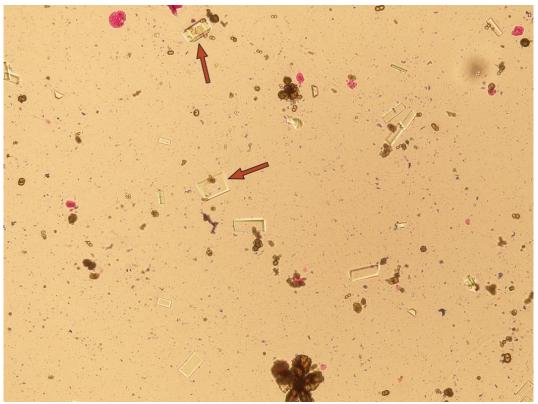
Triple phosphate (coffin-shaped)



Triple phosphate



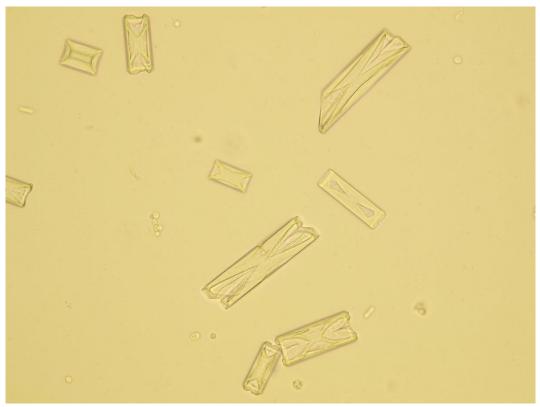
Triple phosphate crystal



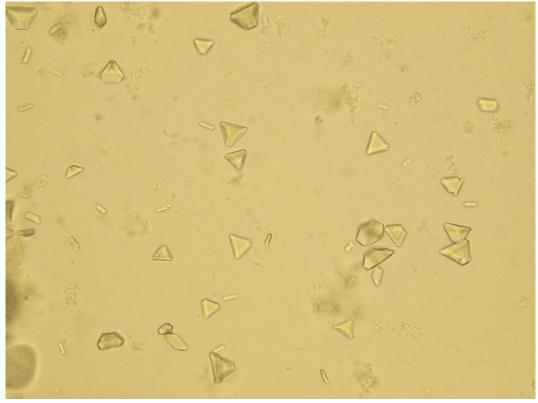
Triple phosphate (arrows)



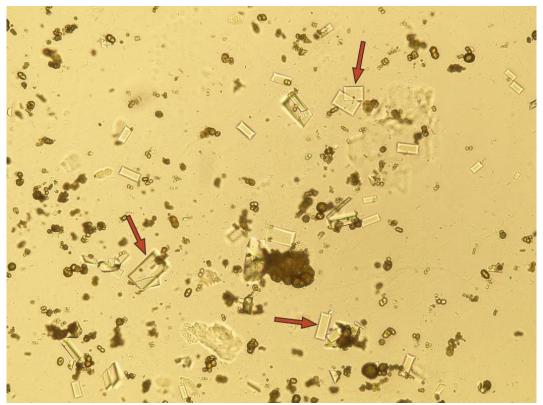
Triple phosphate (coffin-shaped)



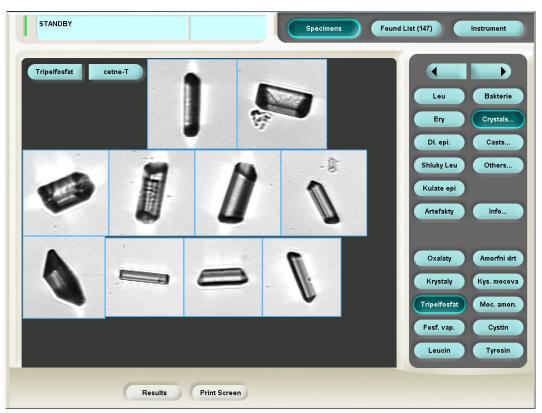
Triple phosphate



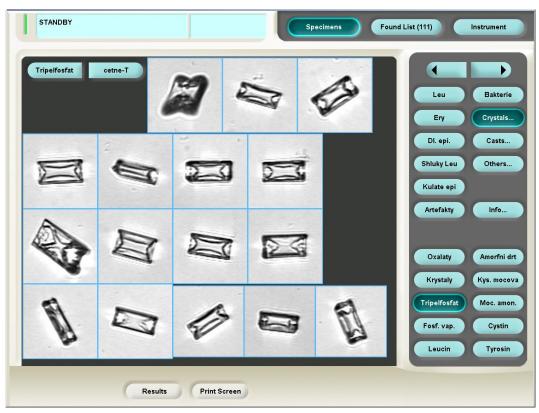
Triple phosphate



Triple phosphate (arrows)



#### Triple phosphate (coffin-shaped)



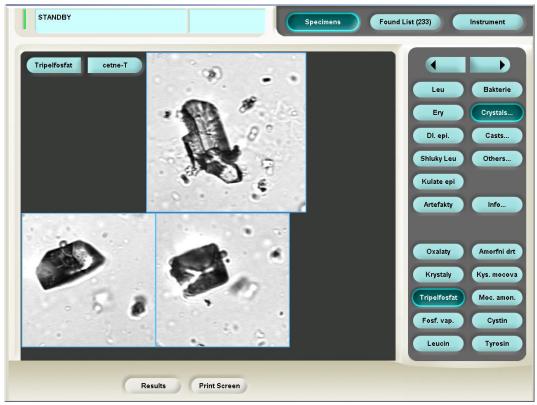
Triple phosphate



**Triple phosphate** 

STANDBY			Specimens Fo	und List (233) Instrument
Tripelfosfat cet	ne-T		<b>1</b>	Leu Bakterie Ery Crystals Dl. epi. Casts
	$\Box$			Shluky Leu Others Kulate epi Artefakty Info
1			$\Diamond$	Oxalaty Amorfni drt Krystaly Kys. mocova Tripelfosfat Moc. amon. Fosf. vap. Cystin
	Results Pr	int Screen		Leucin Tyrosin

**Triple phosphate** 

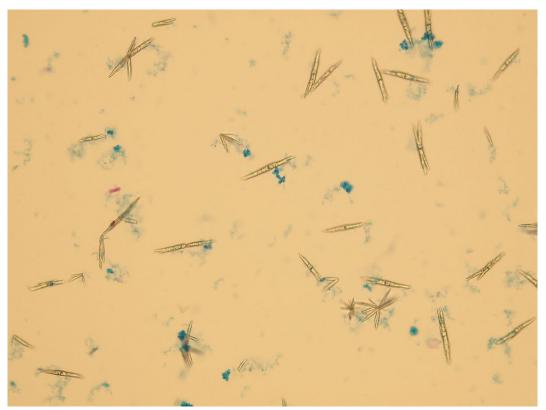


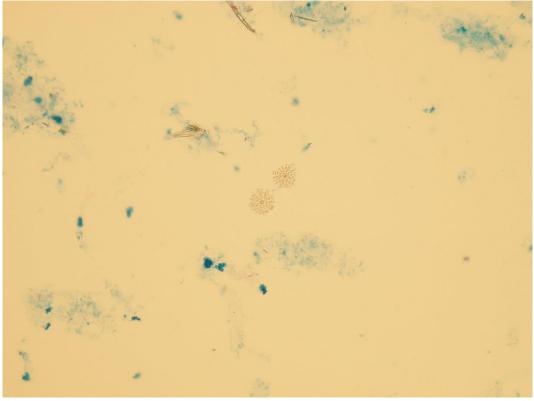
Massive triple phosphate

### Calcium phosphate

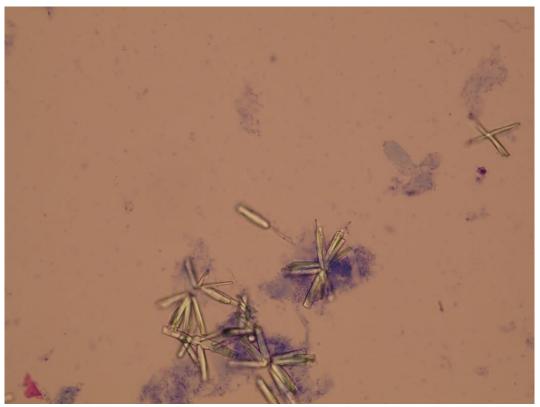
These crystals can be differentiated from uric acid crystals by polarization microscopy. Unlike uric acid, calcium phosphate doesn't turn polarized light.

#### Stained sediment



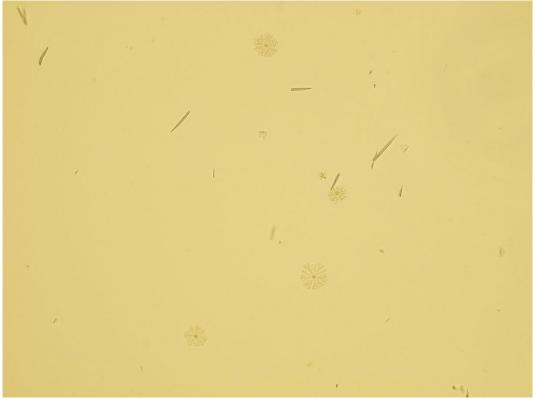


Calcium phosphate (needle-shaped and star-shaped druses)



Calcium phosphate

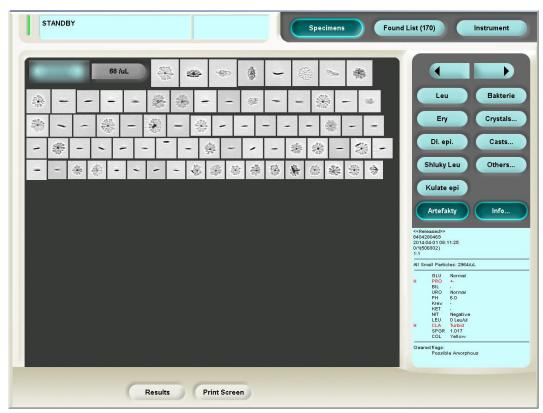
M



Calcium phosphate (needle-shaped and star-shaped druses)

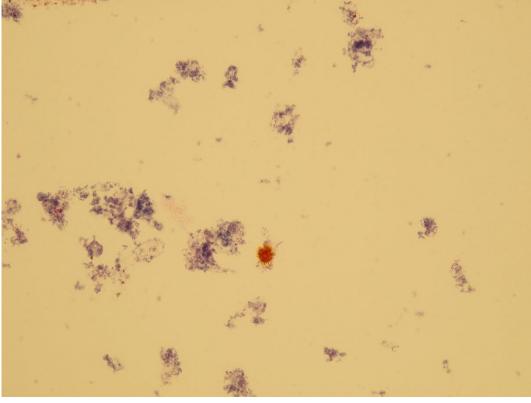


MEASURE 0/3(	508759)		Specimer	is Found	List (178) Instrument
Krystaly	cetne-Kr	*		*	Leu Bakterie Ery Crystals Dl. epi. Casts Shluky Leu Others Kulate epi
	-	*			ArtefaktyInfoOxalatyAmorfni drtKrystalyKys. mocovaTripelfosfatMoc. amon.Fosf. vap.Cystin
_	Results	Print Screen	-	_	Leucin Tyrosin

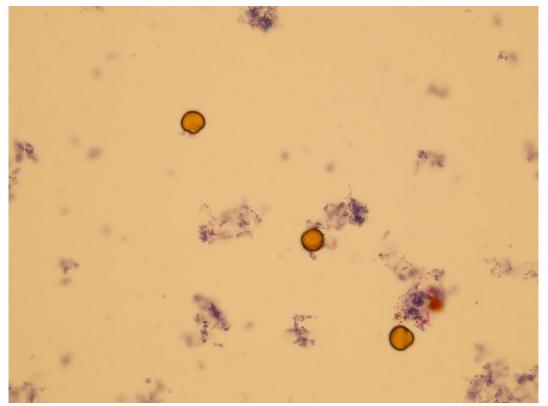


Calcium phosphate (needle-shaped and star-shaped druses)

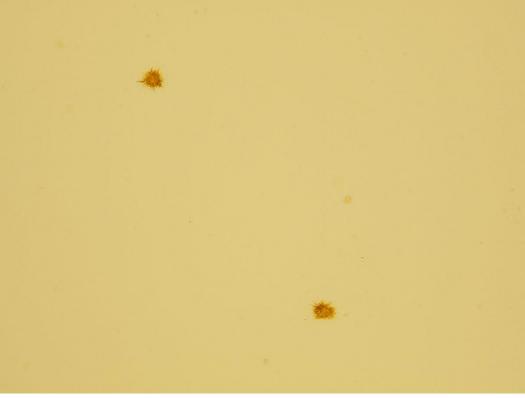
### Bilirubin



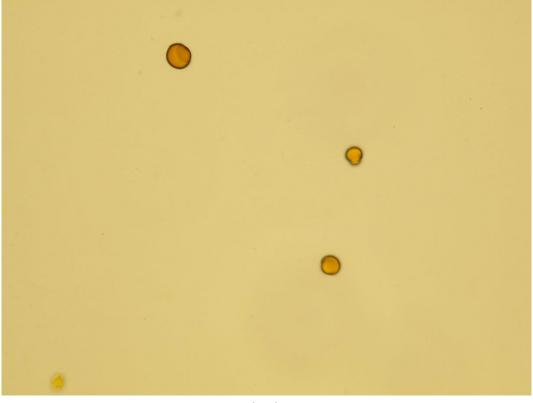
Bilirubin



Bilirubin ~ 96 ~



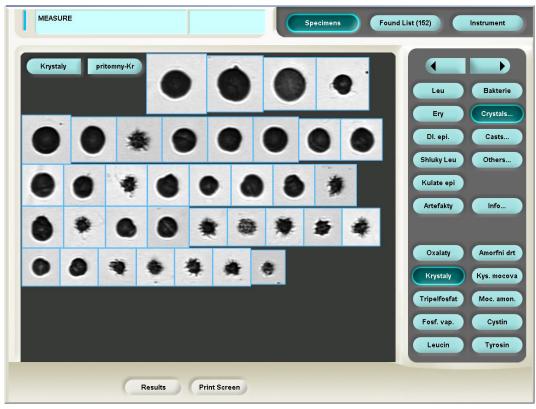
Bilirubin



Bilirubin

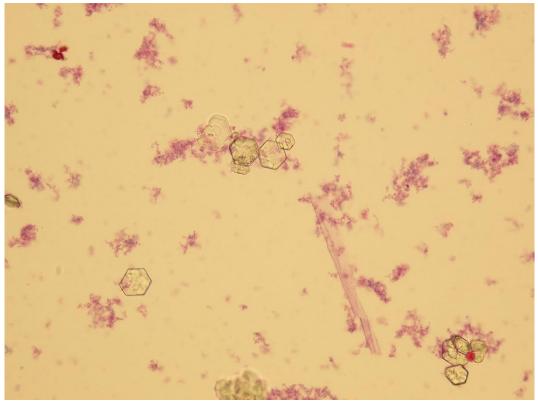
STANDBY				Specimen	s Foun	d List (101) Instrument
Krystaly pritomny-Kr	*	*	*	*	*	Leu Bakterie Ery Crystals Dl. epi. Casts Shluky Leu Others Kulate epi Artefakty Info Oxalaty Amorfni drt Krystaly Kys. mocova Tripelfosfat Moc. amon. Fosf. vap. Cystin Leucin Tyrosin
Re	sults P	rint Screen				

Bilirubin

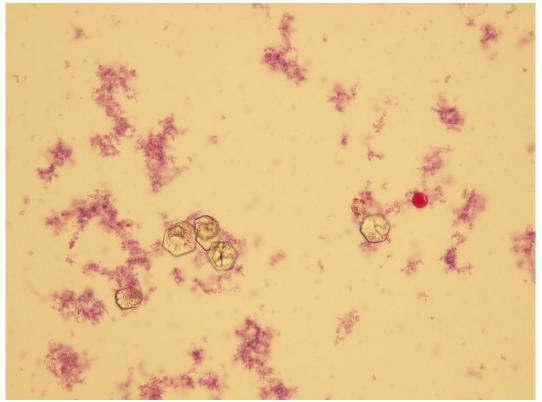


Bilirubin

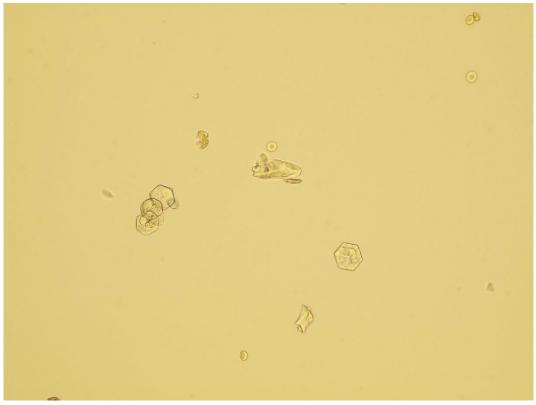
# Cystine



Cystine



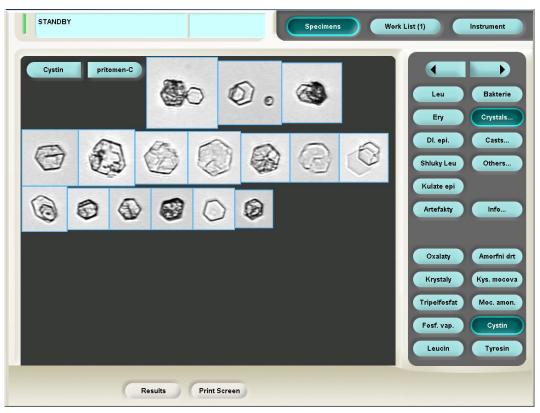
Cystine  $\sim 99 \sim$ 



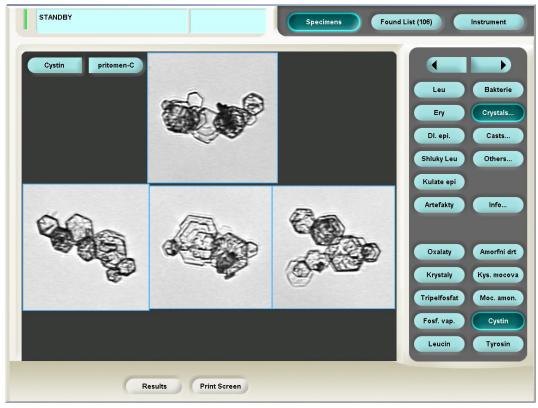
Cystine



Cystine

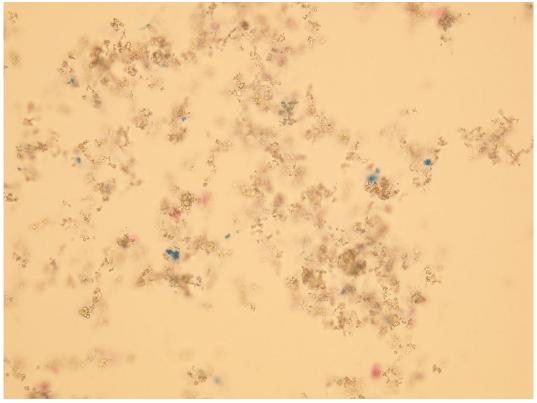


Cystine

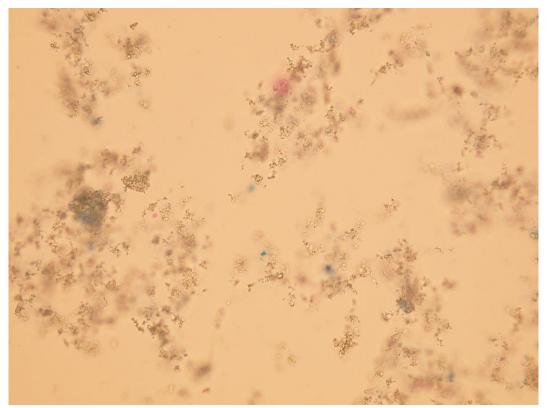


Cystine

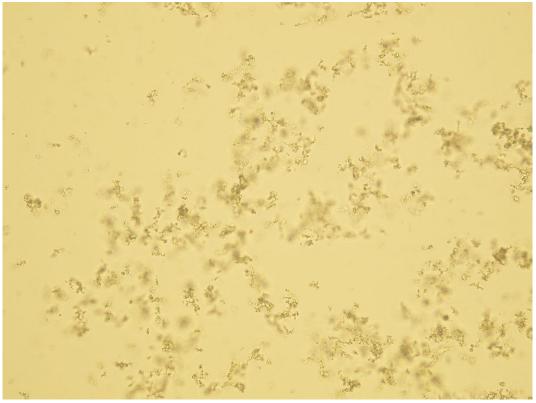
# Amorphous microcrystals



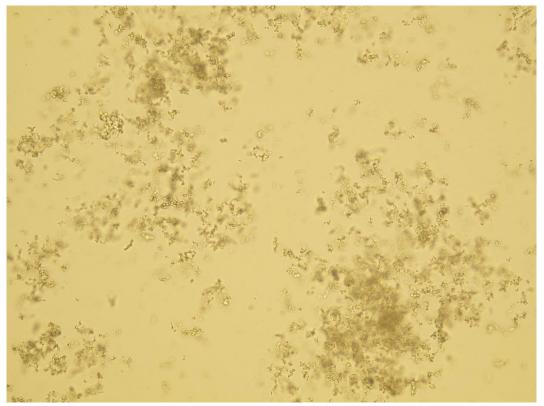
Amorphous microcrystals



Amorphous microcrystals



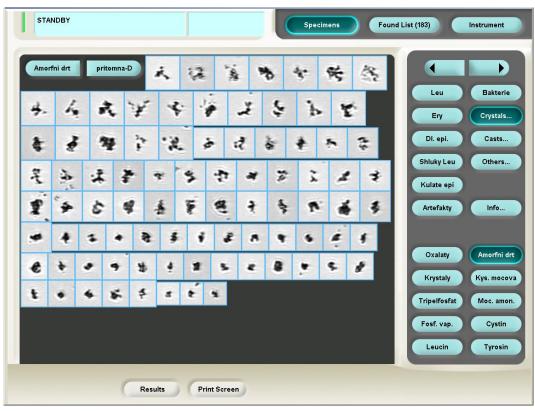
Amorphous microcrystals



Amorphous microcrystals

STANDBY		Specimens	Found List (183) Instrument
Amorfni dr.       pritomna.D         Image: Comparison of the second	sults Print Screen		Leu Bakterie Ery Crystals DI. epi. Casts Shluky Leu Others Kulate epi Artefakty Info Oxalaty Amorfni drt Krystaly Kys. mocova Tripelfosfat Moc. amon. Fosf. vap. Cystin Leucin Tyrosin

**Amorphous microcrystals** 

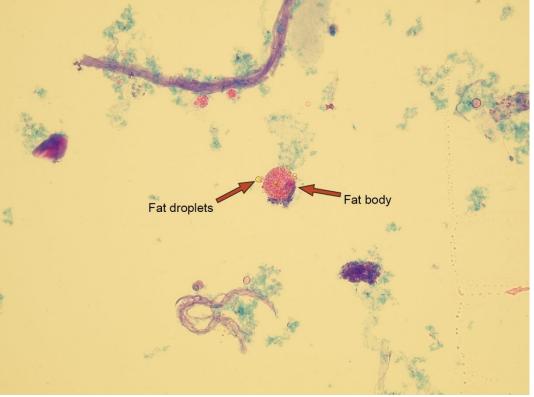


Amorphous microcrystals

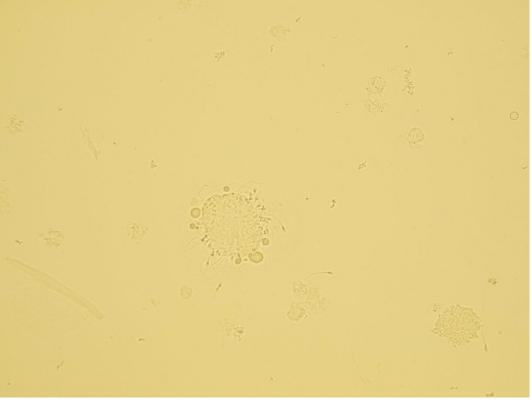
# Lipid particles

Oval fat bodies are renal tubular epithelial cells or macrophages filled with fat globules. The nuclei of these cells are barely visible. Fat bodies are accompanied by the presence of free fat droplets and possibly by hyaline casts with fat inclusions or fatty casts. Oval fat bodies and free fat droplets (globules) in urine are considered to be an exceptional and serious finding. The presence of fat with biological origin in urine is called lipiduria and indicates severe renal dysfunction. It is associated with serious damage and necrosis of renal epithelial cells as in nephrotic syndrome, advanced diabetes mellitus or some kinds of poisoning.

Fat globules may be seen in the urine as a contamination from oiled catheter or vaginal creams. There are no fat bodies and casts in sample in this case. Examples are shown in the Artifacts category.

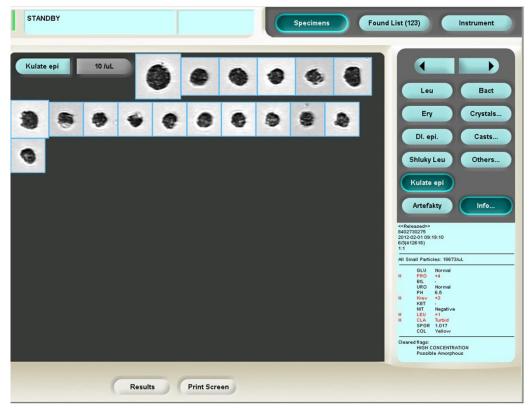


Macrophage and fat droplets



Macrophage with fat droplets and sperms

### Pictures from iQ 200 analyzer (IRIS)

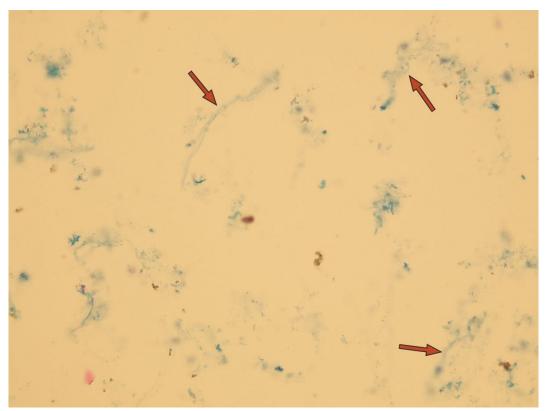


**Oval fat bodies** 

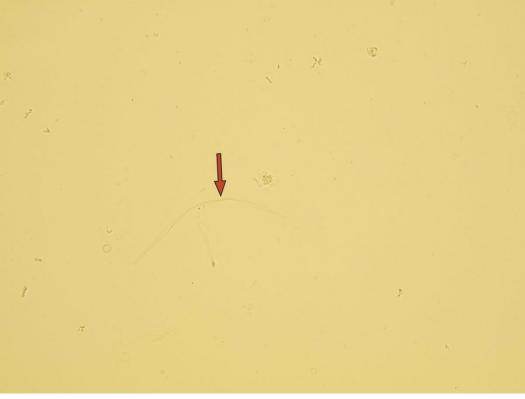
# **Mucus**

Mucus is secreted by glands in urinary tract and vagina. Its quantity could be increased with inflammatory conditions. It is common constituent in urine with no diagnostic significance.

#### Stained sediment

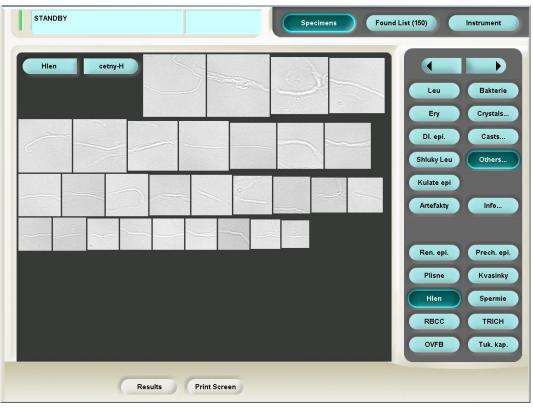


Mucus



Mucus

### Pictures from iQ 200 analyzer (IRIS)



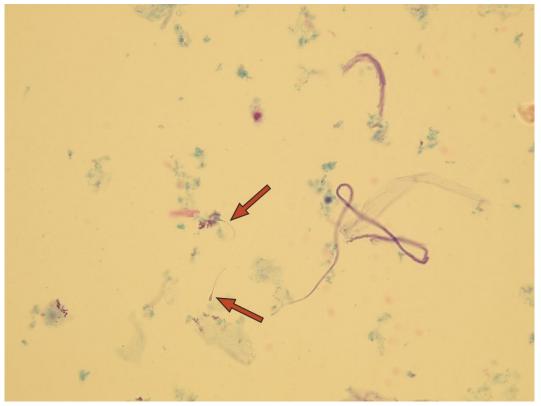


~ 108 ~

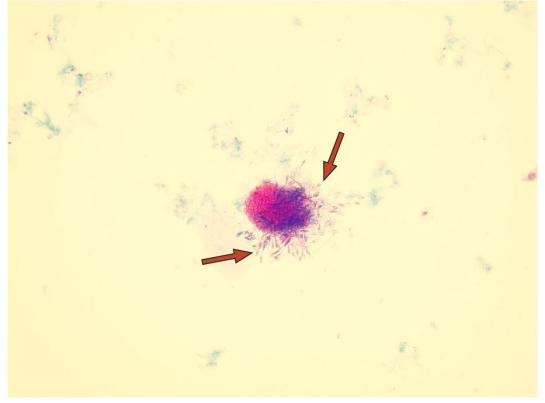
## **Sperms**

The finding of sperms is common in man's urine. It is insignificant in women's samples as long as they are not underage girls.

#### Stained sediment



Sperms

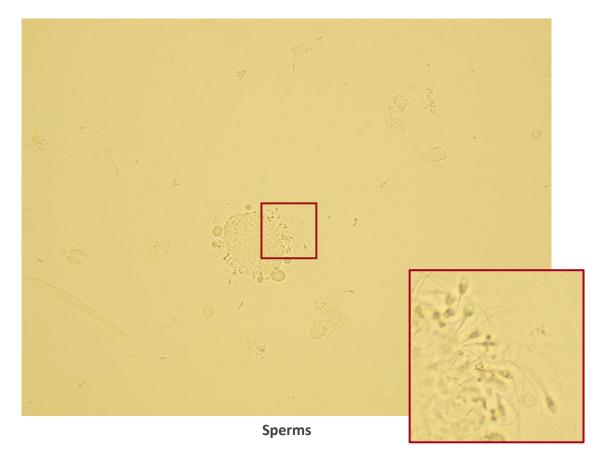


Sperms

#### Native sediment



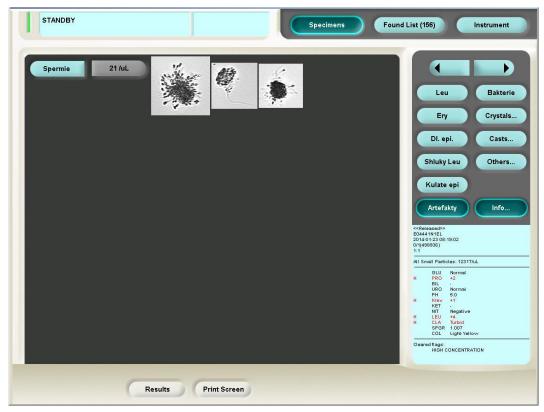
Sperms



#### Pictures from iQ 200 analyzer (IRIS)

STANDBY		Specimens	Found List (156) Instrument
Spermie zaplava-S	*		Leu Bakterie Ery Crystals Dl. epi. Casts
~ ~			Shluky Leu Others Kulate epi Artefakty Info
	-	. ,	Ren. epi. Prech. epi. Plisne Kvasinky Hlen Spermie RBCC TRICH
Res	ults Print Screen		OVFB Tuk. kap.

Sperms

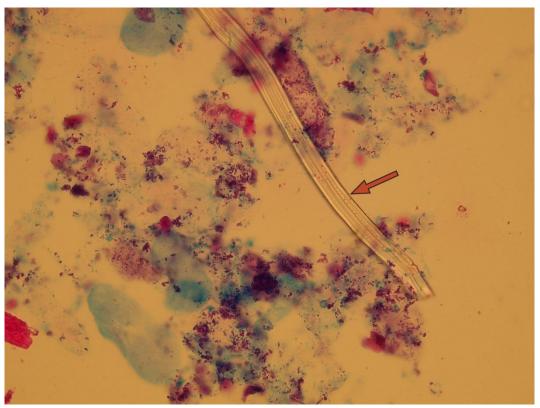


Sperms

### Artifacts

We can find some elements in urine that don't come from patient's body. They have no clinical significance, but it is important to recognize them to avoid confusion with another element. They can have various shapes. Textile and paper fibers and oil droplets are the most common artifacts.

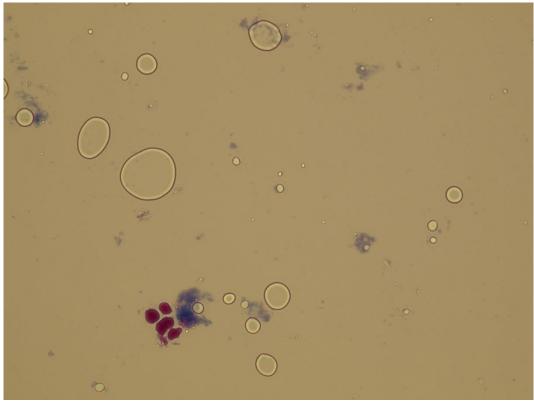
#### Stained sediment



Artifact

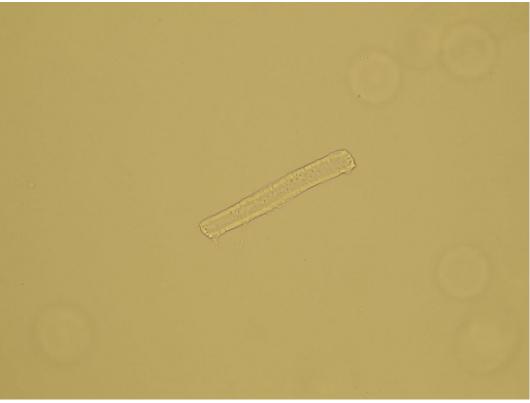


Artifact

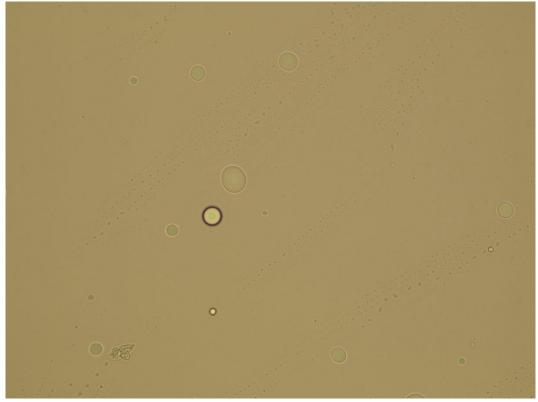


Fat droplets (artificial contamination)

#### Native sediment



Artifact

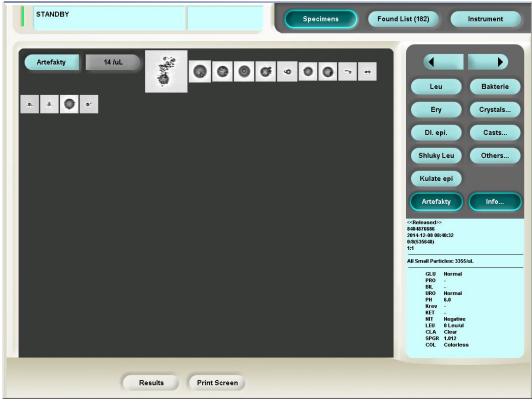


Fat droplets (artificial contamination)

#### Pictures from iQ 200 analyzer (IRIS)

Artefaky       2 Jul         Image: Constraint of the state of the st	STANDBY		Specimens	Found List (97) Instrument
	Artefakty 2 /uL	Results Print Screen		Leu Bakterie Ery Crystals Dl. epi. Casts Shluky Leu Others Kulate epi Artefakty Info *«Relessed» 84444739 2013-12-20 11-2250 D02(49535) 11 At Small Particles: 5520uL GLU Normal PRO : BlL : Wirmal RCO : BlL : Wirmal GLU Normal RCO : BlL : Bl

Artifact



Fat droplets (artificial contamination)

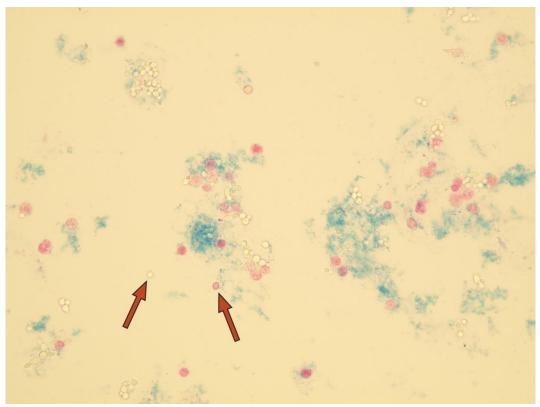
# **Interesting findings**

#### Erythrocytes x yeast

Occasionally, it is difficult to distinguish between single yeast and erythrocyte due to their similar shape and size in the pictures from automatic analyzer and in native sediment. The stained sediment can be used for determinative analysis, because erythrocytes are typically stained pink, but yeasts are colorless.

E	≣ry		412 /uL		0.	0	•	0	0	0	0	0	Leu Bakter
0	0	0			0	0	•	0	0	0	0	0	Ery Crystal
•	σ	0	9	0	0	0	0	0	0	0	•	0	Dl. epi. Casts
0	0	0	0	0	0	0	0	0	0	0	0	0	Shluky Leu Others
0	0	0	0	0	0	0	0	0	0	0	0	0	Kulate epi Artefakty Info
P	0	0	83	0	0	•	0	0	0	0	0	0	< <released>&gt; 8404071477</released>
0	0	0	0	0	0	0	0	•	0	5	0	0	2014-01-05 10:01:08 6/5(496717) 1:1 All Small Particles: 8226A/L
0	0	0	0	0	•	0	0	0	0	0		0	GLU Normal H PRO +2 BIL - URO Normal
0	0	0	0	0	0	0	0	0	•	0	0	0	H 6.0 H Krev +1 KET - NIT Negative H LEU +4
0	0	0	•	0	0	0	0	0	8	0	0	0	H CLA Turbid SPGR 1.016 COL Yellow Cleared flags:

Erythrocytes and yeast together



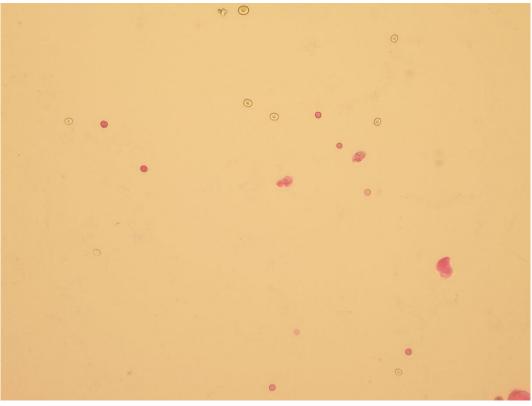
Erythrocytes and yeast together

#### Erythrocytes x oxalates

If erythrocytes and oxalates are both in urine, it is sometimes difficult to distinguish them in the automatic analyzer properly due to their similar size and shape. This applies particularly to calcium oxalate monohydrate (ovoid form). In the stained sediment on the other hand, the erythrocytes are pink and oxalates colorless.



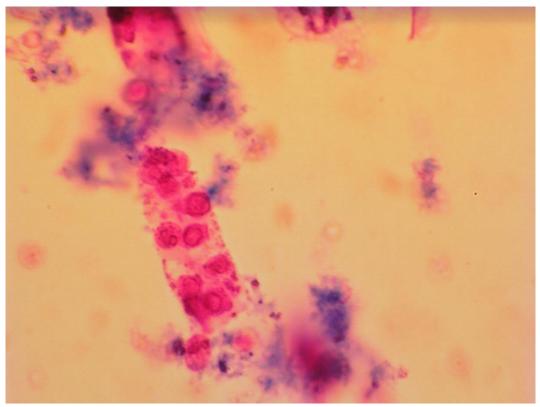
Calcium oxalate mono and dihydrate crystals next to erythrocytes automatically classified as erythrocytes in iQ 200



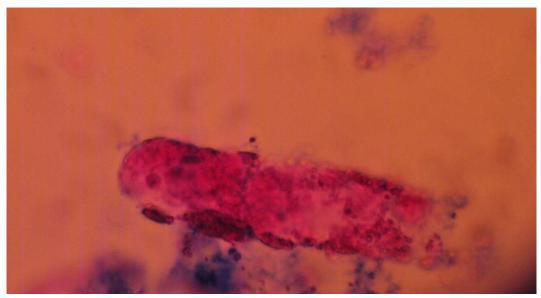
Calcium oxalate monohydrate crystals next to erythrocytes

#### The gradual transformation of pathological casts

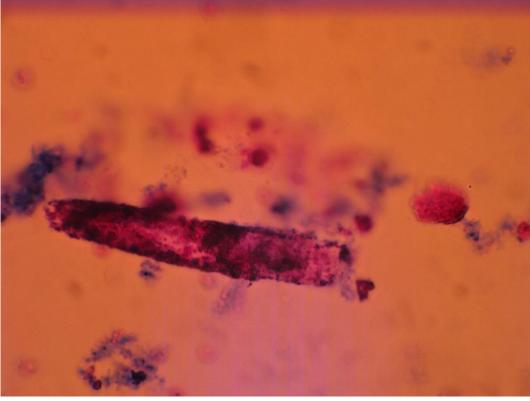
Exceptionally, all stages of cast transformations could be observed in one sample.



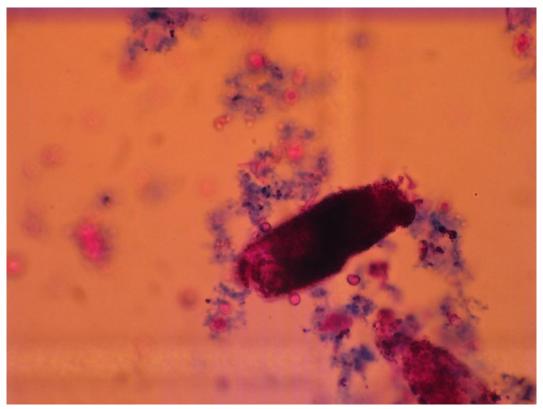
**Cellular cast** 



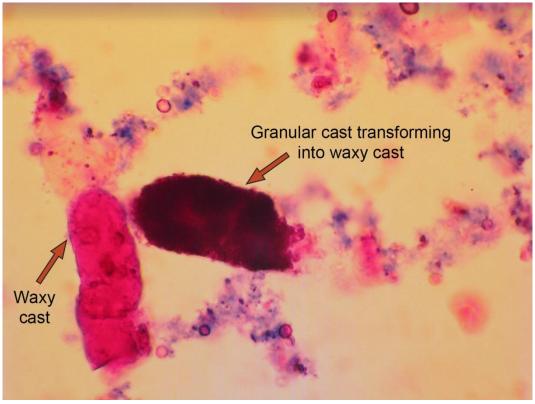
Transition phase of cast from cellular to granular (enlargement ×600)



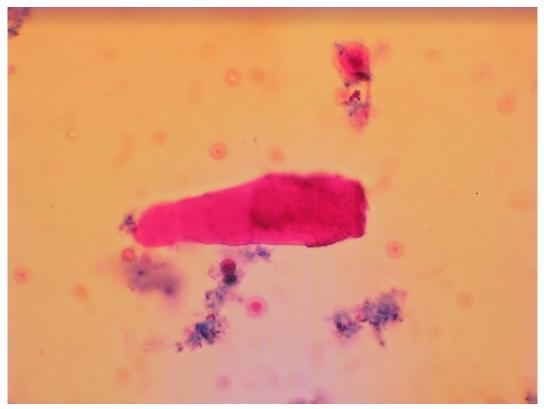
Transition phase of cast from cellular to granular



Granular cast



Transition phase of cast from granular to waxy and waxy cast



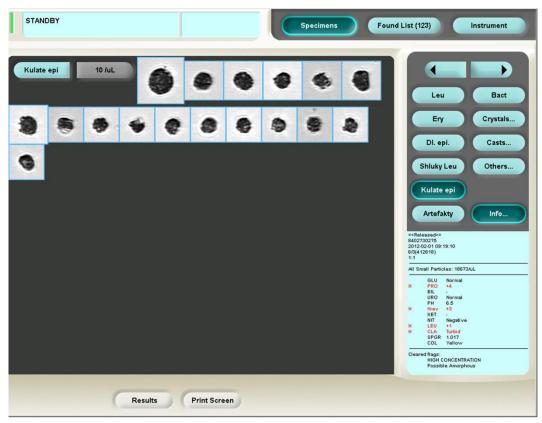
Waxy cast

#### The finding of fat particles in patient with nephrotic syndrome

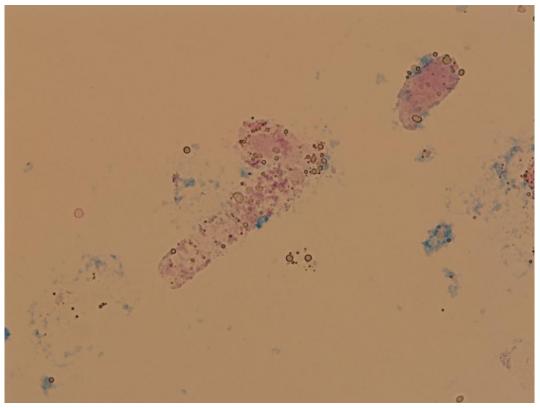
The elements listed below were found in urine of patient with nephrotic syndrome.

STANDBY	Specimens Found List (159) Instrument
Hyal. valce 59 /uL	Leu Bact
	DI. epi. Casts Shluky Leu Others Kulate epi
	Artefakty Info
	Hyal. valce RBCT Grandowne wite Leu. valec CELL EPIC
	CELL EPIC WAXY FATC BROAD Ostatni valce
Results Print Screen	

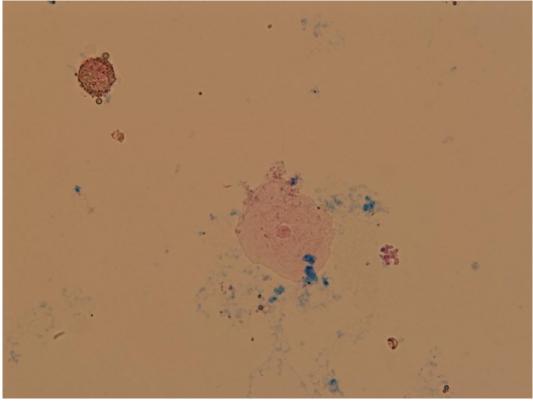
Hyaline casts with fat inclusions of fat droplets and fatty cast (arrow)



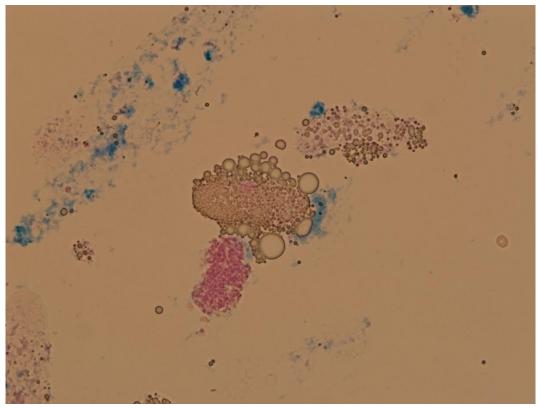
**Oval fat bodies** 



Hyaline cast with fat inclusions of fat droplets



Squamous epithelial cell and oval fat body



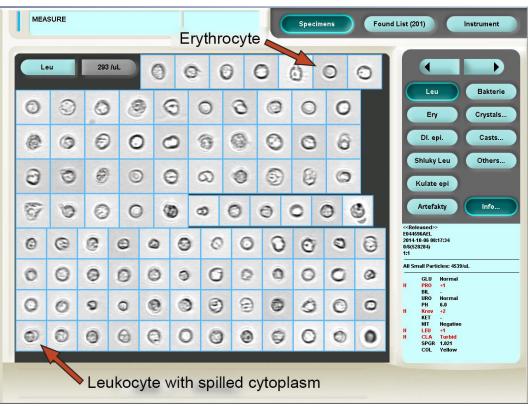
Fatty cast and free fat droplets

### Elements in hypotonic urine

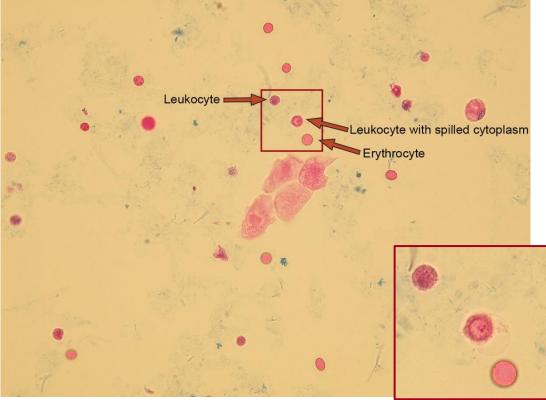
A patient with acute urine bladder inflammation was treated by hydration of the bladder, causing his urine to be hypotonic.

In the urine sample, we found neutrophil granulocytes which are called "glitter cells" because of the rapid Brownian movement of granules inside their cells. The low urine osmolality caused ruptures in the cell membranes of several of these leukocytes which resulted in cytoplasm spilling outside of the cells. These cells are sometimes called "winged leukocytes".

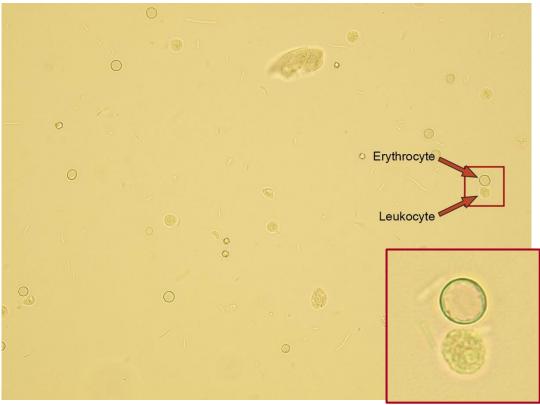
The hypotonic urine from the same patient also caused erythrocytes to swell and their size matched that of the leukocytes. The same size resulted in miscategorization of some erythrocytes in the leukocyte category by the iQ 200 analyzer software leading to a discrepant finding.



Leukocytes (glittering cells) mixed with erythrocytes in the leukocyte category



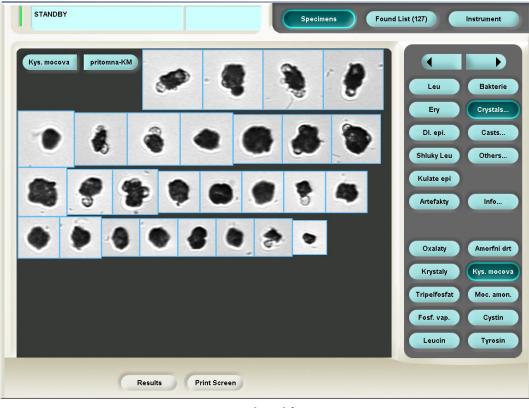
Leukocytes (glittering cells) with erythrocytes



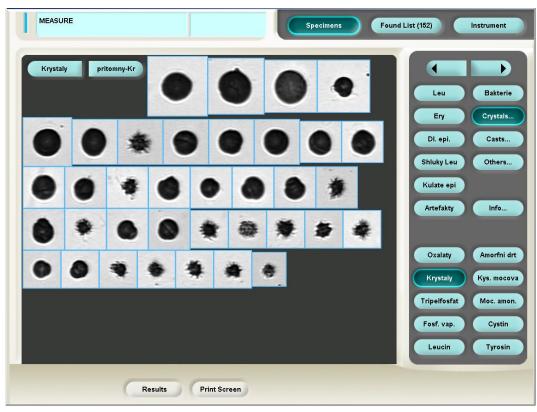
Leukocytes (glittering cells) with erythrocytes

### Problematic spherical particles

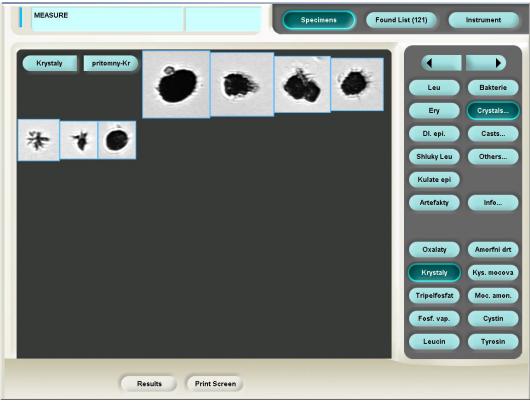
Automatic microscopic analysis may picture various elements resembling big black spheres. They may have various origin including crystals or other cells. Combination of chemical diagnostic strip analysis and microscopy of stained sediment is used to identify them.



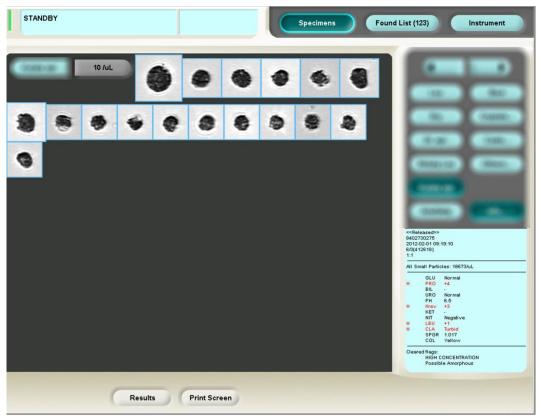
Uric acid



Bilirubin



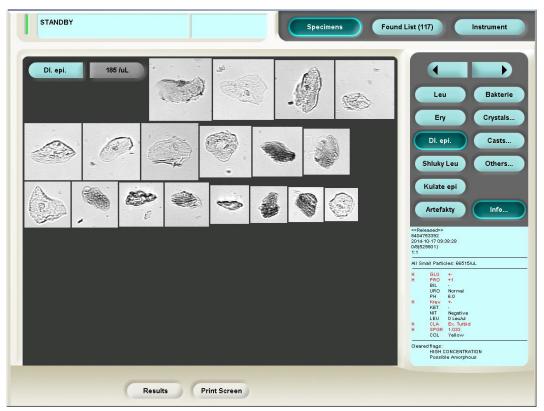
Ammonium urate



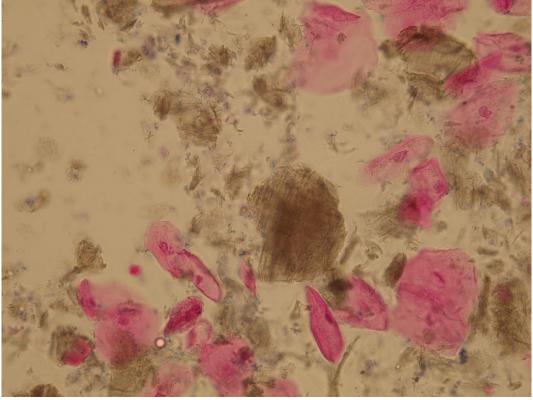
Macrophages with fat bodies

#### Sample contaminated by feces

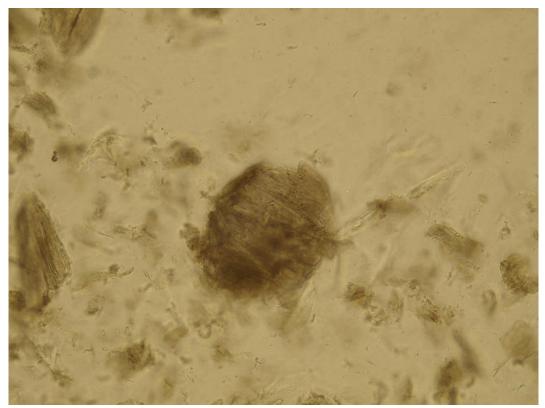
The urine analyzed with iQ 200 showed some dark asymmetric particles miscategorized as squamous epithelial cells. Further investigation with microscopy in stained and native sediment confirmed them to be stool particles. This rare contamination of feces may occur in patients with fistula of bladder.



Fecal particles (black elements) miscategorized in squamous epithelia section



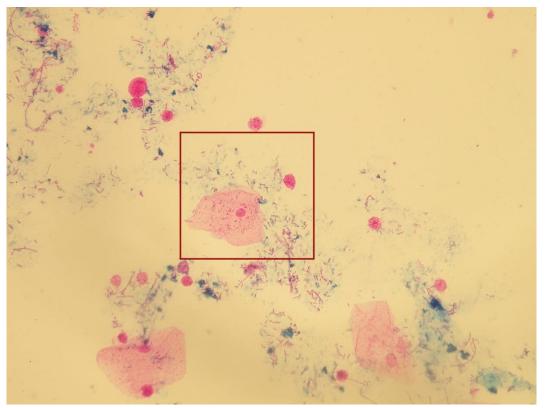
Fecal particles (brown elements) with squamous cells



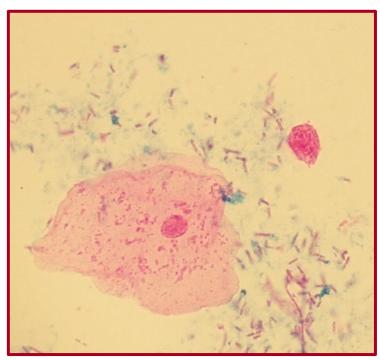
Fecal particles

#### Intracellular Bacteria

Bacteria, most commonly *E. coli*, may be sometimes observed inside epithelial cells of the bladder in samples of patients with urinary tract infection. Insufficient antibiotic treatment does not eradicate bacteria inside the cells and may cause future chronic infections.



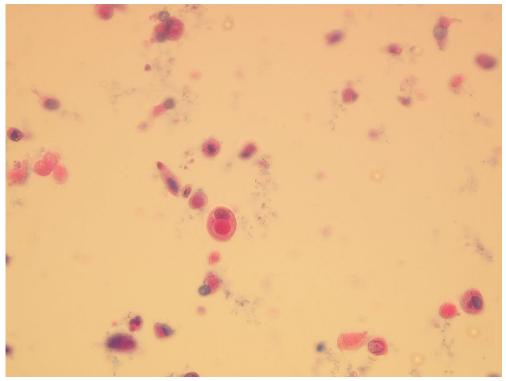
Bacteria inside squamous and transitional epithelia



Bacteria inside squamous and transitional epithelia (cropped from the picture above)

#### Atypical cells

Occasionally, atypical cells may be found with urine sediment microscopy. In this case, the cells are probably of epithelial origin with variable shape, size and multiple nuclei. Such finding should be reported to the responsible physician. The patient was diagnosed with bladder cancer.



**Atypical cells** 

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