

MVRBC Reference Laboratory Sample Requirements and Service Details

Sample Requirements:

**Improperly labeled samples will not be processed.*

**No gel separator tubes.*

Immunoematology Service Requests:

Test Requested	Sample Requirements	Includes the Following
Full Antibody ID	4 EDTA tubes – 7 mL	<ul style="list-style-type: none"> • ABO/Rh • RT/PeG antibody screens • DAT (anti-IgG and anti-C3b,d) • Eluate, as necessary • Antibody ID panels • Applicable reagents used for ID (Ficin, EGA, DTT, Lewis / P1 Substance, etc) • Adsorptions (Plasma and Eluate as appropriate) • Includes transfusion recommendations.
ABO Discrepancy Resolution	4 EDTA tubes – 7 mL	<ul style="list-style-type: none"> • ABO/Rh • Antibody screens, as necessary • Antibody ID panels, as necessary • Antigen typing, as necessary (A1, M, etc) • Will NOT include transfusion recommendations.
Antigen Type ONLY	1 EDTA Tube – 7ml	<ul style="list-style-type: none"> • ABO/Rh • Antigen type as requested • Will NOT include transfusion recommendations.
Direct Antiglobulin Test ONLY	1 EDTA Tube – 7ml	<ul style="list-style-type: none"> • ABO/Rh • Will include elution depending on DAT result. • Will NOT include transfusion recommendations.
Eluate Workup ONLY	2 EDTA Tube – 7ml	<ul style="list-style-type: none"> • ABO/Rh • DAT • Eluate • Adsorption of the eluate, if applicable. • Will NOT include plasma antibody testing or transfusion recommendations.
HDN-Baby Workup	Cord blood sample OR 3 EDTA microtainers from baby	<ul style="list-style-type: none"> • ABO/Rh • DAT (IgG ONLY) • Eluate, as necessary • Will include transfusion recommendations IF mother's specimen is submitted to MVRBC for antibody testing.
HDN-Mother Workup	2 EDTA tubes (5 mL from mother)	<ul style="list-style-type: none"> • ABO/Rh • Basic antibody identification • Will NOT include transfusion recommendations for the mother. • Verification of the mother's antibody results are used for interpretation in the baby's transfusion recommendations.

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ROUTINE Prenatal Service Requests: (Titers performed Monday – Friday)

Test Requested	Sample Requirements	Includes the Following
ROUTINE Prenatal Workup	2 EDTA tubes – 7ml	<ul style="list-style-type: none"> • ABO/Rh • Brief antibody identification • Antibody titer, as necessary • Immunoglobulin classification, as necessary • Will NOT include transfusion recommendations. • Completed Monday through Friday. • Will NOT be completed during weekends or holidays.

Molecular Service Requests:

Test Requested	Sample Requirements	Includes the Following
Red Cell Molecular Phenotype	1 EDTA tube – 2mls or 2 buccal swabs	<ul style="list-style-type: none"> • Complete, 35 red cell antigen profile.
RHD Variant Assay	1 EDTA tube – 2mls	<ul style="list-style-type: none"> • Rh variant determination • Will include transfusion / Rh Immune Globulin guidelines.
HLA Molecular Phenotype	1 EDTA tube – 2mls	<ul style="list-style-type: none"> • HLA Class I phenotype (HLA-A and HLA-B)
HPA Molecular Phenotype	1 EDTA tube – 2mls	<ul style="list-style-type: none"> • HPA phenotype for 22 antigens.

Platelet Antibody Investigations:

Test Requested	Sample Requirements	Includes the Following
HLA / HPA Antibody Investigation <i>WITH</i> Platelet Product Request	2 Serum – 7mls 1 EDTA – 7mls	<ul style="list-style-type: none"> • HLA / HPA antibody screen • HLA antibody Identification, if applicable • HLA /HPA molecular phenotype, as appropriate • <i>Crossmatched or phenotype matched platelet product, as available</i>
HLA / HPA Antibody Investigation <i>ONLY</i>	2 Serum – 7mls 1 EDTA – 7mls	<ul style="list-style-type: none"> • HLA / HPA antibody screen • HLA antibody Identification, if applicable • HLA /HPA molecular phenotype, as appropriate