

Winnipeg Diagnostic Services Immunohematology Referral Testing Services

Red Cell Antibody Investigation MB_REF-01

TEST DESCRIPTION

Red cell antibody identification is performed when atypical antibodies are detected through the antibody screen test or when a Direct Antiglobulin Test (DAT) is positive. The investigation will determine if the identified antibody is clinically significant.

SPECIMEN AND REQUISITION REQUIREMENTS

Specimen(s)

- Three (3) full 5-7 ml EDTA (lavender) tubes mixed thoroughly by gentle agitation.
- Label specimen with the required minimum information: patient's last name, first name, PHIN or hospital number or other unique identifier, date of collection, facility name, and phlebotomist initials.

Complete Requisition (must include)

- Patient's last name, first name, date of birth and PHIN or hospital number or other unique identifier
- Expected date of delivery (EDD) if applicable
- Clinic / Facility Name
- Physician/Health Care Provider name
- · Phlebotomist name, classification, initial
- · Date/time of collection
- · Name, facility, address, contact number of individual to whom the report will be sent

Requisition(s)

- Transfused Patients Request for Miscellaneous Testing Requisition_MB
- Perinatal Patients Request for Perinatal Testing Requisition-MB

PRE-SHIPPING STORAGE

Recommended Refrigeration 1-10°C.

SHIPPING INSTRUCTIONS

Submit samples as soon as possible after collection.

Shipping

- Ship in a container that will maintain temperature at ≥1°C.
- Select shipping method for container to arrive at testing site within 48 hours.

Note: Protect from freezing.

SEND TO

Canadian Blood Services Winnipeg Centre Diagnostic Services Laboratory 777 William Ave. Winnipeg, MB R3E 3R4 Tel: 204-789-1085 Fax: 204-779-8593