

Winnipeg Diagnostic Services Immunohematology Referral Testing Services

RHD Genotyping MB_REF-08

TEST DESCRIPTION

This is a PCR-based assay for the identification of many clinically significant RHD variants (alleles) responsible for normal and altered/absent expressions of the RhD human red cell antigen. This test is used to provide the predicted RhD status of a patient when it cannot be determined due to discrepant, weak or inconclusive serological RhD testing.

SPECIMEN AND REQUISITION REQUIREMENTS

Specimen(s)

- One (1) 2-6 ml EDTA (lavender) tube, 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
- · 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)

Request for RHD Genotyping Requisition_AB

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 Crossmatch Laboratory 777 William Ave. Winnipeg, MB R3E 3R4 Tel: 204-789-1085

Fax: 204-779-8593