

Vancouver Diagnostic Services Perinatal Testing Services

Maternal Routine Testing (ABO/Rh Typing/Antibody Screen) BC_PN-01

TEST DESCRIPTION

Testing includes the determination of patient's ABO group, RhD type, and a screen for the detection of atypical antibodies. Additional testing for red cell antibody identification is performed when atypical antibodies are detected. If the antibody is clinically significant, a titration is done. Rh Immune Globulin (RhIG) treatment recommendations are provided.

Testing Schedule

- Rh unknown patients: For patient's first pregnancy, order testing at initial visit and at 26-28 weeks.
- Known Rh positive patients: Order testing at initial visit.
- Known Rh negative patients: Order testing at initial visit, 26-28 weeks, and postpartum.

IMPORTANT

For Rh negative patients, the 26-28 week sample must be collected prior to RhIG administration.

SPECIMEN AND REQUISITION REQUIREMENTS

Specimen(s)

- One (1) 6-7 ml EDTA (lavender) tube, mixed thoroughly by gentle agitation.
- Label specimen with the required minimum information: patient's last name, first name, PHN or unique identifier and date of collection.

Complete Requisition (must include)

- · Patient's last name, first name, date of birth and PHN or unique identifier
- Expected date of delivery (EDD)
- Clinic and Health Care Provider name, complete address, phone and fax number
- · Phlebotomist ID information
- · Date of collection

Requisition(s)

Perinatal Screen Request Requisition BC

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 BC & Yukon Centre Diagnostic Services Laboratory 4750 Oak Street Vancouver, BC V6H 2N9

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