

# Winnipeg Diagnostic Services Immunohematology Referral Testing Services

## Discrepancy Resolution (ABO, Rh, Other Major Blood Groups) MB\_REF-02

#### **TEST DESCRIPTION**

Phenotype (antigen) testing of the patient's red cells is performed to resolve variant or discordant results. Testing with antisera from different licensed commercial companies is performed.

<u>Note:</u> This testing should not be ordered on patients who have been recently transfused (within 120 days) or have had a bone marrow or stem cell transplant.

#### SPECIMEN AND REQUISITION REQUIREMENTS

#### Specimen(s)

- One (1) full 5-7 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 Miscellaneous 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