REQUEST FOR SEROLOGICAL PROBLEM RESOLUTION

MEDIC Regional Blood Center
1601 Ailor Avenue
Knoxville, TN 37921-6702
Telephone 865/521-2640

REASON FOR SUBMISSION

- ☐ Unidentified Antibody
- ☐ Difficulty in Crossmatching
- ☐ Difficulty in ABO Grouping
- ☐ Difficulty in Rh Typing
- ☐ Confirmation Only
- ☐ Suspected Transfusion Reaction

Name of Hospital/Laboratory _____

Telephone: Area Code _____ Number _____ Ext. _____

Report to be directed to: _____

Patient's Name _____
LAST FIRST

DOB _____ SEX _____ RACE _____

Clinical Diagnosis _____

Active Bleeding? _____ **Present Hgb** _____ g/dl

Is patient scheduled for surgery? _____

Date Specimen Drawn _____ Date Sent _____

INSTRUCTIONS

1. **Please send minimum: 10cc clotted blood**
   5cc EDTA
2. Carefully label tubes with name and date.
3. Send segment from any crossmatched units.
4. Please enclose history form in container.
5. **SEND a copy of your panel sheets.**
6. **CALL LABORATORY 521-2640**
   BEFORE SENDING SPECIMENS.

PATIENT HISTORY

Pregnancies: Number_____HDN?_____

Total Number of Transfusions_____

Approximate dates of Transfusion in last 90 days_____

Current Medication:_____

_____

_____

Previously identified antibodies:

PLEASE GIVE YOUR SEROLGOICAL FINDINGS (Indicate Strength of Reactions)

Cell Testing

Anti-A	
Anti-B	
Anti-D	
Weak D	

Blood Type ☐

Reverse Grouping

A_1 Cells	
B Cells	

Direct Antiglobulin Test

	IS	RT
Polyspecific		
Anti-IgG		
Anti-Complement		

ANTIBODY SCREEN

Cell	TUBE IS	TUBE 37	TUBE AHG	GEL
I				
II				
III				
Auto				

KEY IS = Immediate Spin (=) = No Agglutination; RT = Room Temp. Incubation (+) = Agglutination (1-4); 37 = 37° Incubation GEL = Gel Method; AHG = Anti-Human Globulin

HOSPITAL CROSSMATCH RESULTS

X-Match Date	Tech	Unit #	Grp/ Rh	Tube IS	Tube 37	Tube AHG	GEL	Antisera			Comments

Other pertinent test results _____

Do You Need Blood For This Patient? Yes_____ No_____ How many?_____

How soon is this problem resolution needed?_____

FAILURE TO SUBMIT REQUESTED DATA ON THE PATIENT MAY DELAY OR PREVENT RESOLUTION OF THE PROBLEM.