

Client: Example Client ABC123
123 Test Drive
Salt Lake City, UT 84108
UNITED STATES

Physician: Doctor, Example

Patient: Patient, Example

DOB: 10/16/1991
Gender: Female
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
Collection Date: 00/00/0000 00:00

Antibody Screen RBC with Reflex to Identification

ARUP test code 0010020

Antibody Screen Automated **Positive** (Ref Interval: Negative)
Please see results of the antibody identification.

Antibody ID RBC Prenatal-Reflex to Titer

ARUP test code 0013005

ABORh **ABNeg(weak D-)**
This patient types as "weak D" Rh negative (RH:-1).

Probable Rh Phenotype **rr**
D (RH1) antigen: Negative
C (RH2) antigen: Negative
E (RH3) antigen: Negative
c (RH4) antigen: Positive
e (RH5) antigen: Positive

Direct Coombs **Negative** (Ref Interval: Negative)

Antibody Identification

H=High, L=Low, *=Abnormal, C=Critical

Anti-D (RH1), anti-wr(a) (DI3), and anti-Le(b) (LE2), were previously identified in this patient's serum and remain reactive. Anti-He (MNS6) was previously identified in this patient's serum but was not detected at this time. No additional red cell antibodies were apparent at this time.

Anti-D and -wr(a) are clinically significant antibodies capable of causing hemolytic disease of the fetus and newborn (HDFN) and transfusion reactions.

Patient history will need to be evaluated to differentiate between passively acquired antibody and sensitization to the D antigen.

Anti-wr(a) is directed against a low incidence antigen present in less than 0.01% of the population.

Anti-Le(b) is clinically insignificant with regard to red cell transfusion and hemolytic disease of the fetus and newborn (HDFN). The corresponding Le(b) (LE2) antigen is not fully developed at birth.

Anti-He is directed against a low incidence antigen present in approximately 3% of the African American population and has not been detected in the Caucasian population. Due to the rarity of the anti-He antibody, clinical significance has not been established.

If red cell transfusion is required for mother or infant, donor units selected shall be negative for the D (RH1) and wr(a) (DI3) antigens and appear compatible by antiglobulin crossmatch.

The patient's serum is adequate for use in screening for the wr(a) antigen, since the antibody is strongly reactive and the corresponding antigen is of low incidence in the population.

Selected Liquid Nitrogen 2 Frozen Red Cell Panel

ARUP test code 0010082

Selected Liq Nitro 2 Panel ID	Done
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Antibody Titer

ARUP test code 0013006

Antibody Titer 1	Anti-D (RH1) INTERPRETIVE INFORMATION: Antibody Titer 1 The titer result is the inverse of the highest dilution that has a positive reaction.
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Ab 1 Titer Current Specimen	< 2
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Ab 1 Date Previous Specimen	07.15.22
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Ab 1 Titer Previous Specimen	< 2
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H=High, L=Low, *=Abnormal, C=Critical

Unless otherwise indicated, testing performed at:

ARUP LABORATORIES | 800-522-2787 | aruplab.com
500 Chipeta Way, Salt Lake City, UT 84108-1221
Jonathan R. Genzen, MD, PhD, Laboratory Director

Patient: Patient, Example
ARUP Accession: 22-224-108401
Patient Identifiers: 01234567890ABCD, 012345
Visit Number (FIN): 01234567890ABCD
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