

Overview

Useful For

Additional proof of alloantibody specificity
Assessment of solid organ transplantation donor compatibility
This test is **not useful** for the purpose of establishing paternity.

Method Name

Hemagglutination

NY State Available

Yes

Specimen

Specimen Type

Whole Blood EDTA

Shipping Instructions

Specimen must arrive within 7 days of draw

Specimen Required

Container/Tube: Pink top (EDTA)

Submission Container/Tube: Original tube

Collection Instructions: Send specimen in original tube.

Reject Due To

Gross hemolysis OK

Specimen Minimum Volume

Pediatric: 2 mL blood in 6 mL EDTA tube

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Whole Blood EDTA	Refrigerated (preferred)	7 days	
	Ambient		

Clinical & Interpretive

Clinical Information

The presence or absence of a cellular antigen is an inherited trait. As a general rule, individuals will not make antibody directed against an antigen present on their own red blood cells.

Reference Values

Reported as Negative or Positive

Interpretation

[A1 antigen type will be resulted as "pos" indicating that the antigen is present, or by "neg" indicating that the antigen is absent.](#)

Cautions

No significant cautionary statements

Clinical Reference

AABB Technical Manual. 19th edition. Edited by MK Fung, AF Eder, SL Spitalnik, CM Westhoff: AABB 2017

Performance**Method Description**

Agglutination of red cells with an antiserum represents the presence of the corresponding antigen in the red cells.(AABB Technical Manual. 19th edition. Edited by MK Fung, AF Eder, SL Spitalnik, CM Westhoff: AABB 2017)

PDF Report

No

Specimen Retention Time

14 days

Performing Laboratory Location

Rochester

Fees & Codes**Test Classification**

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

CPT Code Information

86905