

REQUEST FOR TESTING

HLA / Immunogenetics Laboratory

921 Terry Ave. | Seattle, WA 98104 **Phone** 206-689-6580 | **Fax** 206-689-6582

Laboratory Staffed for Questions 7:00am-5:00pm Monday-Friday

For current test descriptions and CPT codes visit https://www.bloodworksnw.org/labs/tests

TIME RECEIVED

| | | | PO. | UTINE Tests | | | | |
|---|---|---|---|--------------------------------------|---|---|----------|--|
| | | Solid Organ Tran | | UTINE TEST | S | HLA for other purposes | | |
| 3088-00 | | Lymphocyte Crossmatch Ro | | 3630-00 | | Platelet Alloantibody Workup (Refractory to Platelet Transfusions | 3) | |
| 3088-04 | П | Lymphocyte Crossmatch – | | 0000-00 | | Trace Transaction (Northead Transaction) | 3) | |
| | | | | 3084-00 | | HLA Class I (A, B, C) Typing | | |
| 3084-06 | | HLA Class I + II (A, B, C, DI | , | 3084-01 | | HLA Class II (DR, DQ) Typing | | |
| 3081-08 | | Import Deceased Donor Typ | ping | 3915-07 | | HLA-A*02 Typing | | |
| 3915-21 | | HLA-DPB1 / DPA1 Typing | | 3082-01 | | HLA-A*29 Typing (Birdshot Retinopathy association) | | |
| | | | | 3082-05 | | HLA-B*15:02 (B75) Typing | | |
| 3083-06 | | HLA Antibody Detection | | 3082-00 | | HLA-B*27 Typing (Ankylosing Spondylitis, other arthropathic | es) | |
| 3083-16 | | HLA Antibody Specificity | O. D (O. L. T.L.) | 3082-02 | | HLA-B*51 Typing (Behcet's Disease association) | | |
| 3083-17 | | HLA Antibody Monitoring D | | 3082-03 | | HLA-B*57:01 Typing (Abacavir hypersensitivity) | | |
| 3083-23 3083-20 | | HLA Antibody Monitoring Di HLA Antibody Specificity C1 | , , , | 3082-04 3915-31 | | HLA-B*58:01 Typing HLA-DQB1*06:02 Typing (Narcolepsy association) | | |
| 3083-20 | | HLA Antibody Specificity C | | 3082-07 | | HLA-DQ2/DQ8/DQA1*05 Typing (Celiac association) | | |
| 3083-19 | Н | MICA Antibody Specificity | 5/(5/9 | 0002-07 | | Tier Bazibaoi barti oo Typing (Ociaco association) | | |
| | | , | | | | Other | | |
| 3085-00 | | Specimen Processing/Stora | age - Serum | | | | | |
| 3085-01 | | Specimen Processing/Stora | ~ | | | | | |
| | | | | | | | <u> </u> | |
| | STAT Tests- Performed 24/7 | | | | | | | |
| 3083-18 | | HLA Antibody Monitoring D | SA- STAT (6hr TAT) | 3088-02 | | Lymphocyte Crossmatch– STAT | | |
| CTAT toot | o boye | • • | , , | A lab raquiros t | ho or | | ly the | |
| | | | | | | rdering institution to notify HLA @ (206) 817-7730. Additional HLA lab reserves the right to perform the test as routine. | iy, irie | |
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| Report verbal test results to: | | | | | at phone # | | | |
| NOTE: Info | ormatio | on in BOLD must be completed | 4 | | | | | |
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- For solid organ transplant tests: Contact transplant coordinators at your center for drawing and sample requirements.
- For HLA Typing for all other indications: Draw one 7-10cc ACD (yellow top) or EDTA (lavender top) tube.

All samples must be properly labeled and the information must agree with the identification on the request for testing. A specimen identified by a name must also provide a numeric identifier which may include hospital number, SSN, or other coded identifier. *A collection date is required to be on the sample tubes or the request for testing form. All samples must be sent to Bloodworks Northwest in a sealed, leak proof container marked with a biohazard sticker to comply with OSHA safety standards. **Ship at ambient temperatures.**

CLIA Number: 50D2006313 WMTS Number: MTSA.FS.60152131 FORM-00860 v5