
Lab Dept: Transfusion Services

Test Name: Rh ONLY

General Information

Lab Order Codes: RHD

Synonyms: Rh factor; D factor; Rh type; Rh₀; Rh typing; D typing

CPT Codes: 86901 - Rh (D)

Test Includes: Rh₀ (D) typing. Testing patient RBC's with anti-Rh₀ (D)

Logistics

Test Indications: For the determination of the Rh₀ (D) type prior to treatment of ITP patients.

Rho(D) typing is part of pretransfusion testing – Type and Screen, Newborn Workup

Lab Testing Sections: Transfusion Service

Phone Numbers: MIN Lab: 612-813-6824

STP Lab: 651-220-6558

Test Availability: Daily, 24 hours

Turnaround Time: 15 minutes

Special Instructions: N/A

Specimen

Specimen Type: Whole blood

Container: Lavender top (EDTA) tube

Alternate tube: Red top tubes will be accepted, but will delay specimen processing to allow for clotting. **(SST tubes are Not acceptable.)**

Draw Volume: 0.5 – 2 mL blood

Collection:	All specimens submitted to the Transfusion Service must be appropriately labeled at the bedside with the time and date of collection, and the signature of the individual collecting the specimen. A completed order, either through the HIS or general requisition must accompany each specimen. It is not always necessary to collect a new sample prior to the provision of blood for patients. Consult with the Transfusions Service prior to collecting additional samples if the patient status is unknown.
Special Processing:	Lab Staff: Refrigerate specimen
Patient Preparation:	Refer to Collection of Patient Specimens for full details. The patient must be positively identified when the specimen is collected. The label on the blood specimen must correspond with the identification on the patient's Medical Record wrist or ankle band (or ED ID) and on the physician/practitioner's orders. The specimen must be timed, dated, and signed by the phlebotomist at the bedside.
Sample Rejection:	Gross hemolysis; sample placed in a serum separator tube; specimen tube not properly labeled

Interpretive

Limitations:	<p>When a newborn's direct antiglobulin test (DAT) is strongly positive, maternal antibody may be occupying all D sites on the infant's red cells; this can lead to typing the infant as Rh negative.</p> <p>Confirmation of Rh positive, Weak D cannot not be confirmed if the patient has a positive Direct Coombs (DAT).</p>
Methodology:	Hemagglutination
References:	Technical Manual, Current Edition, Bethesda MD, AABB