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**Lab Dept:** Hematology

**Test Name:** PNH TESTING

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***General Information***

**Lab Order Codes:** PANH

**Synonyms:** Paroxysmal Nocturnal Hemoglobinuria; CD59; Pi-linked Antigen; Acid Hemolysin; FLAER; Ham-Crosby Sugar-Water Test; Sucrose Fragility

**CPT Codes:** 88184 – Flow cytometry; 1<sup>st</sup> marker, red blood cell  
88184 – Flow cytometry; 1<sup>st</sup> marker, white blood cell  
88185 x6 – Flow cytometry; each additional marker, WBC  
88185 – Flow cytometry; each additional marker, RBC

**Test Includes:** Flow cytometry evaluation of PI-Linked antigens and when positive will include a pathologist review and interpretation when appropriate.

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***Logistics***

**Test Indications:** The assay is useful in screening or in confirming the diagnosis of PNH and in following those patients. It will detect the presence or absence of GPI-linked antigens on the surface of peripheral blood granulocytes, monocytes, erythrocytes, and/or lymphocytes. The sugar water test and the Ham's test are not suggested for the evaluation of patients with possible PNH.

**Lab Testing Sections:** Hematology - Sendouts

**Referred to:** Mayo Medical Laboratories (MML Test: PLINK)

**Phone Numbers:** MIN Lab: 612-813-6280  
STP Lab: 651-220-6550

**Test Availability:** Daily, 24 hours

**Turnaround Time:** 1 – 2 days, testing set up daily

**Special Instructions:** N/A

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***Specimen***

**Specimen Type:** Whole blood

**Container:** Lavender top (EDTA) tube  
Alternate tube: Yellow top (ACD solution B) tube

|                             |   |
|-----------------------------|---|
| <b>Draw Volume:</b>         | 2.6 mL (Minimum: 1 mL) blood  |
| <b>Processed Volume:</b>    | Same as Draw Volume.  |
| <b>Collection:</b>          | Routine venipuncture. Mix thoroughly by gentle inversion.   |
| <b>Special Processing:</b>  | Lab Staff: <b>Do not</b> centrifuge. Specimen should remain in original collection container. Store and ship at ambient temperature. Must arrive within 72 hours of collection. <b>Specimen must not be frozen.</b> |
| <b>Patient Preparation:</b> | None  |
| <b>Sample Rejection:</b>    | Improper specimen collection or handling; clotted specimen; frozen specimen; mislabeled or unlabeled specimens; gross hemolysis   |

***Interpretive***

|  |              |
|--|--------------|
| RBC Partial Antigen Loss (RBC Type II)   | 0.00 – 0.99% |
| RBC Complete Antigen Loss (RBC Type III) | 0.00 – 0.01% |
| Granulocytes                             | 0.00 – 0.01% |
| Monocytes                                | 0.00 – 0.05% |
| An interpretive report will be provided  |              |

|                     |   |
|---------------------|---|
| <b>Limitations:</b> | The sugar water test and Ham's test are no longer recommended for the evaluation of patients with possible PNH. Recent transfusion can decrease the sensitivity of this test and interfere with accuracy.   |
| <b>Methodology:</b> | Flow Cytometric Immunophenotyping   |
| <b>References:</b>  | <a href="#">Mayo Medical Laboratories</a> March 2017  |
| <b>Updates:</b>     | 3/11/2004: Test moved from Allina-United Hospital to Mayo Medical Laboratories.<br>4/25/2005: Updated for 2005 CPT coding.<br>3/16/2010: Test updated at MML, additional antibodies, change in CPT coding. Change in ref ranges and reporting.<br>4/22/2013: RBC Type I no longer reported. Updated names for RBC Types II and III.<br>3/1/2017: Collect tube update. |