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**Lab Dept:** Serology

**Test Name:** HLA TYPING (HLA CLASS I and II)

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***General Information***

**Lab Order Codes:** HLA

**Synonyms:** Class I and II Antigen Typing; Histocompatibility Testing; HLA Typing; Human Leukocyte Antigen Test; Tissue Typing; HLA – A, B, C, DR & DQ Typing, HLA Class I/II

**CPT Codes:** 81370 – HLA Class I and II typing, low resolution

**Test Includes:** Serological definition of all “A, B, C, DR, DQ” or Class I and II HLA antigen specificities currently recognized by WHO (World Health Organization)

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***Logistics***

**Test Indications:** Bone marrow transplantation, HLA disease association studies, Organ transplantation, Transplant workup

**Lab Testing Sections:** Serology - Sendouts

**Referred to:** Fairview-University Diagnostic Laboratory – Immunology/Histocompatibility (Fairview code: IMM)

**Phone Numbers:** MIN Lab: 612-813-6280

STP Lab: 612-220-6550

**Test Availability:** Specimens are accepted Monday - Thursday, 24 hours; and on Fridays before 1:00 PM. Weekend collection is not recommended unless unavoidable.

**Turnaround Time:** Testing performed Monday - Friday. Results are reported within 2 weeks.

**Special Instructions:** Must include exact diagnosis: Solid Organ Recipient, Solid Organ Donor (with recipient noted), Bone Marrow Recipient, or Bone Marrow Donor.

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***Specimen***

**Specimen Type:** Whole blood

**Container:** Lavender top tube

<b>Draw Volume:</b>	7 mL (Minimum: 2 mL) blood
<b>Processed Volume:</b>	Submit unprocessed whole blood in original Vacutainer®.
<b>Collection:</b>	Draw specimens according to the containers and amounts outlined above.  If the person being drawn is known to have a very low WBC count or is difficult to draw, contact the Laboratory to determine absolute minimum amounts of blood needed
<b>Special Processing:</b>	Lab Staff: Store and ship at room temperature. <b>Do Not</b> refrigerate or freeze. Must arrive Monday-Friday at Fairview University.
<b>Patient Preparation:</b>	Collect specimens prior to dialysis.
<b>Sample Rejection:</b>	Frozen; refrigerated; clotted specimen; mislabeled or unlabeled specimen

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### ***Interpretive***

<b>Reference Range:</b>	Interpretive report generated
<b>Critical Values:</b>	N/A
<b>Limitations:</b>	N/A
<b>Methodology:</b>	Molecular PCR/SBT (Sequence based typing)
<b>References:</b>	<a href="#">Fairview University Diagnostic Laboratory</a> August 2013
<b>Changes:</b>	11/21/2003: CPT codes updated due to method change, Method changed to Molecular typing, previously listed as cytotoxicity. 3/1/2005: Changed tube type requirement, previously listed as yellow or green. Updated CPT coding for 2005 standards. Adjusted draw volume previously listed as 20 mL (Minimum:10 mL). Test description changed to reflect DQ and DR typings as being included in the testing. 5/12/2010: CPT codes updated 8/13/2013: CPT update

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