**Purpose:**

This procedure provides instructions for labeling tubes for manual Hemagglutination testing.

**Procedure:**

|  |  |  |
| --- | --- | --- |
|  | **Action** | **Related Documents**  |
| **1** | * Examine tubes for cracks, chipped edges and dirt.
* Discard unacceptable tubes.
 |   |
| **2** | * Include adequate information to accurately link test results to appropriate record.
 |  |
| **3** | * Patient Identification:
* Minimum 3 letters of last name OR
* First name if more than one patient has the same last name

*Use of medical identifier is not acceptable due to confusion with donor number.* |   |
| **4** | * Donor Identification:
* Minimum last 3 digits of unique donor number OR
* Sticker from donor bag

*First 6 digits of donor number are NOT unique.**Last 5 digits may be duplicated between draw sites.*  |  |
| **5** | * Antisera:
* Single letter designation; i.e. anti-C = C
* Multiple letter designation: i.e. anti-Fya = Fya
 |  |
| **6** | * Reagent cells:
* Antibody Detection/Screening Cells: cell number only is adequate
* Antibody Identification Panel: cell number is adequate
 |  |
| **7** | * + Auto Control: AUTO or AC
 |  |
| **8** | * + Direct Antiglobulin Testing:
* Polyspecific antisera: POLY
* Anti-IgG: IgG
* Anti-C3d: C3
* Control: CT
 |  |

**References:**

AABB Technical Manual, Current Edition