**Purpose:**

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

**Procedure:**

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| --- | --- | --- | --- |
|  | | **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