

January 27th, 2021

Good morning,

For Information.

NHSBT RCI will be implementing some changes in our reports; See below for changes.

Please note, the following changes will be made to the Red Cell Antibody Status table in the RCI reference antibody reports and will be implemented in reports compiled from **2nd March 2021**.

• **Hospital detected antibodies**

Hospital detected antibodies will only be included in the Red Cell Antibody Status table as hospital detected, if RCI cannot confirm the presence of the hospital identified antibody and the corresponding antigen type is confirmed as negative by RCI.

The antibody table appearance in the final report for these results will indicate: -

- The antibody type as 'Hosp identified – NOT CONFIRMED BY NHSBT'
- The antibody technique will show as 'HOSP ONLY – NOT CONFIRMED BY NHSBT'.
- The sample type for these antibodies will be entered as 'N/A'.

If RCI cannot detect the hospital identified antibody and the corresponding antigen type is positive or cannot be determined, the antibody specificity will not be included in the Red Cell Antibody Status table, but a comment will be included in the text body of the report.

These antibodies **DO NOT** appear on antibody cards.

The format of the new antibody type in the RCI reference report is consistent with the current report and will show all other antibodies as indicated during testing, screenshot of a final report shown below.

Red Cell Immunohaematology

RCI NHSBT LIVERPOOL 14 ESTUARY BANKS SPEKE LIVERPOOL MERSEYSIDE L24 8RB	Patient: TEST PAT LPOOL TEST DoB: 25-Mar-2000 NHS No: Hospital No: Address:	Sample No: 099 33 18 026278 H NHSBT No: 5540050678 Date Sampled: 26-Jan-2021 Date Received: 26-Jan-2021 22:38:11 Date Reported: 26 January 2021 Hosp Samp ID: TEST LIVE
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Primary Requesting Clinician: NONE EDD: 10-Aug-2021 Gestation: 12 weeks at sampling Charge Code: D010

O RhD negative C+c-E-e+K-

Red Cell Phenotype: Jk(a-)

Red Cell Antibody Status

Type	Specificity	Technique	Sample Type
Hosp identified -NOT CONFIRMED BY NHSBT	Ant-D	HOSP ONLY- NOT CONFIRMED BY NHSBT	N/A
Hosp identified -NOT CONFIRMED BY NHSBT	Ant-c	HOSP ONLY- NOT CONFIRMED BY NHSBT	N/A
Hosp identified -NOT CONFIRMED BY NHSBT	Ant-Jka	HOSP ONLY- NOT CONFIRMED BY NHSBT	N/A

Select ABO and K compatible, D-, c-, E-, Jka- red cell units for crossmatching by IAT.

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Consultant Haematologist: **Therese Callaghan** Head of Laboratory: **Daniel Palmer**

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The new antibody type will appear in Sp-ICE against the antibody list for the patient as shown in the screen shot below.

Patient name: 26 NOV SPICE TEST PAT **NHSBT Number:** You have new ICEMail **Hide [x]**
Date of birth: 26 Nov 2000 **NHS number:** No NHS Number
Address: This data has been suppressed

Reported	Specialty	Location	Clinician	Status
26 Jan 2021 12:23	RCI Reference RBR21	HEAD OF BLOOD TRANSFUSION (Not Specified)	F	

Additional information is available for this report

- [RCI Report \(26 Jan 2021 13:02\)](#)

Sample 0993318026454H (Patient) Collected 26 Nov 2020 00:00 Received 26 Nov 2020 17:13
 A limited data set is displayed below. For full test results you must open the PDF

Sample 0993318026454H (Patient) Collected 26 Nov 2020 00:00 Received 26 Nov 2020 17:13

ABO/RhD group

ABO/RhD group	O RhD negative
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Antibody Information

Antibody Specificity * Anti-D

Type	HOSP ONLY- NOT CONFIRMED BY NHSBT
Technique	HOSP ONLY- NOT CONFIRMED BY NHSBT
Sample Type	Not applicable

Antibody Information

Antibody Specificity * Anti-Fya

Type	HOSP ONLY- NOT CONFIRMED BY NHSBT
Technique	HOSP ONLY- NOT CONFIRMED BY NHSBT
Sample Type	Not applicable

Antibody Information

Antibody Specificity * Anti-3a

Type	HOSP ONLY- NOT CONFIRMED BY NHSBT
Technique	HOSP ONLY- NOT CONFIRMED BY NHSBT
Sample Type	Not applicable

RCI Report

RCI Report

You must open the PDF report for full results.

End of report
 Print

NOTE: To view the full RCI report on the patient in Sp-ICE the pdf must still be opened as usual.

• **Repeat sampling requirements**

An additional change is being made in response to user requests around repeat sampling comments in RCI reports. Previously we have utilised a standard comment in conjunction with supplying the EDD information, however this comment was not specific for EDD. The new comment will now include repeat sampling frequency based upon EDD, presuming that EDD has been provided by the referrer.

The comment uses the EDD given by the referrer to calculate the repeat sampling requirements in line with BSH guidelines. It will appear in the below circumstances.

- Anti-D when resulted as type ALLO, NS (not specified) or HOSPONLY with an EDD provided
- Anti-c when resulted as type ALLO, NS (not specified) or HOSPONLY with an EDD provided
- Anti-K when resulted as type ALLO, NS (not specified) or HOSPONLY with an EDD provide

Example reports below for ALLO anti-D at 12 weeks gestation and at 29 weeks gestation, gestation specific comment is highlighted in yellow.

Red Cell Immunohaematology **NHS**
Blood and Transplant

Patient: TEST PATIENT
 COMMS PRINTOUT

Sample No: 099 93 00 000267 *
 NHSBT No: 5537985616

HOSPITAL TRANSFUSION LABORATORY
 ROYAL HALLAMSHIRE HOSPITAL
 GLOSSOP ROAD
 SHEFFIELD
 SOUTH YORKSHIRE
 S10 2JF

DoB: 25-Mar-2000
 NHS No: Hospital No: 123456A
 Address:

Date Sampled: 08-Feb-2021
 Date Received: 09-Feb-2021 15:36:54
 Date Reported: 9-Feb-2021 15:40:27
 Hosp Samp ID: COMMS PRINTOUT

Primary Requesting Clinician: 103000X7 HEAD OF BLOOD TRANSFUSION
 EDD: 24-Aug-2021
 Gestation: 12 weeks at sampling
 Charge Code: D010

O RhD negative C+c-E+e-K-

Red Cell Antibody Status	Type	Specificity	Technique	Quantification (IU/mL or Titre)	Sample Type
Allo	Anti-D	IAT	Quant	2.4	Plasma

ANTIBODY AND CLINICAL SIGNIFICANCE
 Haemolytic disease of the newborn is unlikely when the maternal anti-D level remains below 4 IU/mL.

CLINICAL ADVICE
 This woman should be in the care of a hospital obstetric unit.

FURTHER ACTIONS
 At delivery, if the baby is typed as D positive, a cord DAT should be performed and, if positive, the baby's Hb and bilirubin monitored.

OTHER
 A current paternal phenotype or fetal genotype may provide useful information.

REPEAT SAMPLING
 BSH guidelines recommend repeat testing. Please send further samples in 4 weeks' time.

BLOOD SELECTION
 Select ABO and K compatible, D-, C-, E-, red cell units for cross-matching by IAT.

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NHS Blood and Transplant – Liverpool, L24 8RB. Tel: 0151 268 7148
 Consultant Haematologist: Therese Callaghan Head of Laboratory: Daniel Palmer
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Red Cell Immunohaematology **NHS**
Blood and Transplant

Patient: TEST PATIENT
 COMMS PRINTOUT

Sample No: 099 93 00 000267 *
 NHSBT No: 5537985616

HOSPITAL TRANSFUSION LABORATORY
 ROYAL HALLAMSHIRE HOSPITAL
 GLOSSOP ROAD
 SHEFFIELD
 SOUTH YORKSHIRE
 S10 2JF

DoB: 25-Mar-2000
 NHS No: Hospital No: 123456A
 Address:

Date Sampled: 08-Feb-2021
 Date Received: 09-Feb-2021 15:36:54
 Date Reported: 9-Feb-2021 15:40:48
 Hosp Samp ID: COMMS PRINTOUT

Primary Requesting Clinician: 103000X7 HEAD OF BLOOD TRANSFUSION
 EDD: 27-Apr-2021
 Gestation: 29 weeks at sampling
 Charge Code: D010

O RhD negative C+c-E+e-K-

Red Cell Antibody Status	Type	Specificity	Technique	Quantification (IU/mL or Titre)	Sample Type
Allo	Anti-D	IAT	Quant	2.4	Plasma

ANTIBODY AND CLINICAL SIGNIFICANCE
 Haemolytic disease of the newborn is unlikely when the maternal anti-D level remains below 4 IU/mL.

CLINICAL ADVICE
 This woman should be in the care of a hospital obstetric unit.

FURTHER ACTIONS
 At delivery, if the baby is typed as D positive, a cord DAT should be performed and, if positive, the baby's Hb and bilirubin monitored.

OTHER
 A current paternal phenotype or fetal genotype may provide useful information.

REPEAT SAMPLING
 BSH guidelines recommend repeat testing. Please send further samples in 2 weeks' time.


BLOOD SELECTION
 Select ABO and K compatible, D-, C-, E-, red cell units for cross-matching by IAT.

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If no EDD has been supplied, then a request to provide an EDD will be included in the report and a repeat sampling requirements will be generic, with an instruction to schedule based upon EDD.

Example RCI report if there is no EDD provided.

Red Cell Immunohaematology 

NHS
Blood and Transplant

HOSPITAL TRANSFUSION LABORATORY ROYAL HALLAMSHIRE HOSPITAL GLOSSOP ROAD SHEFFIELD SOUTH YORKSHIRE S10 2JF	Patient: UNKNOWN EDD PREG IN PROGRESS DoB: 25-Mar-2000 NHS No: Hospital No: Address:	Sample No: 099 93 60 000266 1 NHSBT No: 5537985624 Date Sampled: 07-Feb-2021 Date Received: 09-Feb-2021 16:28:57 Date Reported: 12-Feb-2021 18:24:43 Hosp Samp ID: UNKNOWN EDD
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Primary Requesting Clinician: X000001 HEAD OF BLOOD TRANSFUSION EDD: Gestation: weeks at sampling Charge Code: D010

O RhD negative C+c-E-e+K-

Red Cell Antibody Status					
Type	Specificity	Technique	Quantification IU/mL or Titre		Sample Type
Allo	Anti-D	IAT	Quant	2.6	Plasma

Please provide EDD

ANTIBODY AND CLINICAL SIGNIFICANCE
 Haemolytic disease of the newborn is unlikely when the maternal anti-D level remains below 4 IU/mL.

CLINICAL ADVICE
 This woman should be in the care of a hospital obstetric unit.

FURTHER ACTIONS
 At delivery, if the baby is typed as D positive, a cord DAT should be performed and, if positive, the baby's Hb and bilirubin monitored.


OTHER
 A current paternal phenotype or fetal genotype may provide useful information.

REPEAT SAMPLING
 BSH guidelines recommend repeat testing at 4 weekly intervals to 28 weeks gestation then every 2 weeks to delivery. An EDD has not been provided, please send repeat samples based on gestation.

BLOOD SELECTION
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HW000001 v5.5.01


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If you require any further information please email; donna.hodson@nhsbt.nhs.uk, and we will respond to any of your enquiries as soon as we can.