HLA WORKUP DECEASED DONOR



Pathology and Laboratory Medicine

Orderable - HLA Workup Deceased Donor

Turnaround Time: Retrospective crossmatching: end of the next working day STAT: See Comments Section

Alternate Name(s):

Deceased Donor HLA Typing and Deceased Donor Crossmatch

Specimen:

| Adult Donor blood for a workup involving a kidney or | | |
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| kidney/pancreas transplant (+/- other organs): | | |
| 10 x 8.5 mL ACD (Solution A) (yellow tops)* | | |
| 2 x 4 mL Lavender EDTA top Vacutainer tube | | |
| Adult Donor blood for a workup involving a heart | | |
| transplant only: | | |
| 8 x 8.5 ml. ACD (Solution A) (yellow tops)* | | |
| 1 x 4 mL Lavender EDTA top Vacutainer tube | | |
| Adult Donor blood for a workup involving a liver transplant | | |
| only: | | |
| 1 x 4 mL Lavender EDTA top Vacutainer tube | | |
| *Substitute 14 x 6 mL Sodium Heparin (dark green tops, no | | |
| separator gel) Vacutainer tubes if ACD tubes are not | | |
| available. | | |
| Pediatrics Donor blood for a workup involving the | | |
| transplant of any organ(s) except a liver only: | | |
| Less than 1 year: 15 mLs ACD blood + 2 mL EDTA blood | | |
| 1-10 years: 30 mLs ACD blood + 2 mL EDTA blood | | |
| 11-18 years: 40 mLs ACD blood + 4 mL EDTA blood | | |
| Paediatric Donor blood for a workup involving a liver | | |
| transplant only: | | |
| All ages: 2 to 4 ml. EDTA blood | | |

NOTE: Additional blood samples are required for testing unrelated to HLA i.e. ABO grouping, viral serology etc. Contact the donor coordinator or see the insert in the donor kits for details. Also see the collection information below.



Laboratory: Transplant Lab

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Requisition: TRANSPLANT LABORATORY REQUISITION



Method of Analysis: PCR-Direct Sequencing (NGS) will be used to provide high resolution typing. Where NGS is unavailable, PCR-SSO and SSP methods may also be used.



Test Schedule: As required

NOTE: A small section of donor spleen (approx. 2 cm. X 2 cm.) or several lymph nodes are required at the time of organ retrieval.



Pathology and Laboratory Medicine

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Collection Information:

Pre-packaged "kits" which include tubes and requisitions required for a deceased donor HLA workup are available from Client Support. Contact 519 685-8500 ext 56495 for details.

Some of the tubes in these kits are for tests performed in other laboratories. The SRA staff will distribute the samples to the appropriate areas.

Reference Ranges:

See report

Interpretive Comments:

Anti-HLA antibodies indicate sensitization to potential organ donors and some blood products.

Antibodies directed against donor HLA antigens may predict risk of rejection

The cPRA is an indicator of how broadly any patient's HLA antibody reacts to random donors. Elevated cPRAs may reflect a higher level of difficulty in finding an acceptable donor.

A positive flow cytometry crossmatch indicates the likely presence of donor specific antibodies.

Special Processing:

Deceased donor crossmatch situations should be considered STAT and sample delivery should be handled accordingly.

SRA staff: when the blood arrives, please page the Transplant Laboratory Technologist or the Donor Coordinator/Donor Transplant Specialist according to current policies.

Comments:

Stat T.A.T:

Prospective HLA Typing: 4 to 5 hours from when the technologist is notified and samples are available for testing.

Prospective crossmatching: 4 to 6 hours from when the technologist is notified. Crossmatching of imported donors for HSP recipients may take longer since the HLA typing will be confirmed at this time



Pathology and Laboratory Medicine

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A deceased donor situation must be coordinated by TGLN and/or the local Donor Coordinators/Donor Transplant Specialists.

TGLN: 1-877-363-8456 Local Donor Coordinators: contact LHSC switchboard @ 519-685-8500

Storage and Shipment:

Transport and store blood at room temperature. Transport and store spleen refrigerated.