

Overview

Useful For

Selecting compatible blood products for transfusion therapy

Determining the need for Rh immune globulin in mother of baby

Reflex Tests

Test Id	Reporting Name	Available Separately	Always Performed
ABIDR	Antibody Identification, RBC	Yes	No

Testing Algorithm

Includes ABO and Rh blood group antigens.

Method Name

Hemagglutination

NY State Available

No

Specimen

Specimen Type

Whole Blood EDTA

Specimen Required

Container/Tube: Pink top (EDTA Micro tube)

Specimen Volume: 0.5 mL

Collection Instructions:

1. Invert several times to mix blood.
2. Send whole blood specimen in original tube. **Do not aliquot.**

Specimen Minimum Volume

See Specimen Required

Reject Due To

Gross hemolysis	Reject
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Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Whole Blood EDTA	Refrigerated (preferred)	10 days	
	Ambient	4 days	

Clinical & Interpretive**Clinical Information**

The ABO and Rh typing indicates the presence of 2 of the various blood group systems. The identification of antigens in the ABO and Rh system has its major application in the selection of blood and blood products of the appropriate ABO/Rh type for transfusion therapy and in the determination of the mother's candidacy for Rh immune globulin therapy.

Weak D testing will be performed on all Rh-negative babies.

Reference Values

ABO and Rh blood group antigens identified

Interpretation

Agglutination of red cells with an antiserum represents the presence of the corresponding antigen on the red cells.

Cautions

No significant cautionary statements

Clinical Reference

Cohn CS, Delaney DO, Johnson ST, Katz LM, Schwartz J, eds. Technical Manual. 21st ed. AABB; 2023

Performance**Method Description**

Agglutination of red cells with an antiserum represents the presence of the corresponding antigen in the red cells. (Cohn CS, Delaney DO, Johnson ST, Katz LM, Schwartz J, eds. Technical Manual. 21st ed. AABB; 2023)

PDF Report

No

Day(s) Performed

Monday through Sunday

Report Available

Same day/1 to 2 days

Specimen Retention Time

14 days

Performing Laboratory Location

Rochester

Fees & Codes**Fees**

- Authorized users can sign in to [Test Prices](#) for detailed fee information.
- Clients without access to Test Prices can contact [Customer Service](#) 24 hours a day, seven days a week.
- Prospective clients should contact their account representative. For assistance, contact [Customer Service](#).

Test Classification

This test has been cleared, approved, or is exempt by the US Food and Drug Administration and is used per manufacturer's instructions. Performance characteristics were verified by Mayo Clinic in a manner consistent with CLIA requirements.

CPT Code Information

86900

86901

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
ABONR	Newborn ABORh	19057-9

Result ID	Test Result Name	Result LOINC® Value
ABONR	Newborn ABORh	19057-9