Test Definition: HAEV0

Hemolytic Anemia Summary Interpretation

Overview

Useful For

Incorporating and summarizing subsequent results into an overall interpretation for the HAEV1 / Hemolytic Anemia Evaluation, Blood

Testing Algorithm

When 1 or more molecular tests are added to the HAEV1 / Hemolytic Anemia Evaluation, Blood, then this test is also added as consultative interpretation that summarizes the testing performed as well as any pertinent clinical information. This summary is in addition to interpretations that may be provided for each component. This will be provided after additional testing is complete in order to incorporate subsequent results into an overall evaluation.

Method Name

Only orderable as a reflex. For more information see HAEV1 / Hemolytic Anemia Evaluation, Blood.

Medical Interpretation

NY State Available

Yes

Specimen

Specimen Type

Whole Blood EDTA

Specimen Stability Information

Specimen Type	Temperature	Time	Special Container
Whole Blood EDTA	Refrigerated		

Clinical & Interpretive

Clinical Information

The evaluation of patients with hemolytic anemia can be very complex and involves incorporation of not only testing, but integration of clinical and peripheral blood findings. Nonimmune hemolytic anemia can be due to many causes, including abnormalities in the hemoglobin molecule, red blood cell (RBC) membrane/cytoskeleton, or RBC enzyme cascade. If the evaluation of nonimmune hemolytic anemia utilizes the reflex molecular tests, a summary interpretation will be added to summarize the genetic, protein, peripheral blood, and clinical findings (if provided) will be added. This is beneficial to the ordering provider.

Reference Values

Only orderable as a reflex. For more information see HAEV1 / Hemolytic Anemia Evaluation, Blood.

An interpretation report will be provided.

Interpretation

An interpretive report will be provided that summarizes all testing as well as any pertinent clinical information.

Cautions

No significant cautionary statements

Clinical Reference

1. Steiner LA, Gallagher PG. Erythrocyte disorders in the perinatal period. Semin Perinatol. 2007;31(4):254-261
2. Beutler E. Glucose-6-phosphate dehydrogenase deficiency and other enzyme abnormalities. In: Beutler E, Lichtman MA, Collar BS, Kipps TJ, eds. Hematology. 5th ed. McGraw-Hill Book Company; 1995:564-581
3. Hoyer JD, Hoffman DR. The thalassemia and hemoglobinopathy syndromes. In: McClatchey KD, ed. Clinical Laboratory Medicine. 2nd ed. Lippincott, Williams and Wilkin; 2002:866-895
4. King MJ, Garcon L, Hoyer JD, et al. International Council for Standardization in Haematology: ICSH guidelines for the laboratory diagnosis of nonimmune hereditary red cell membrane disorders. Int J Lab Hematol. 2015;37(3):304-325
5. Lux SE. Anatomy of the red cell membrane skeleton: unanswered questions. Blood. 2016;127(2):187-199 doi:10.1182/blood-2014-12-512772
6. Gallagher PG. Abnormalities of the erythrocyte membrane. Pediatr Clin North Am. 2013;60(6):1349-1362
7. Bianchi P, Fermo E, Vercellati C, et al. Diagnostic power of laboratory tests for hereditary spherocytosis: a comparison study in 150 patients grouped according to molecular and clinical characteristics. Haematologica. 2012;97(4):516-523
8. Glader B. Hereditary hemolytic anemias due to red blood cell enzyme disorders. In: Greer JP, Arber DA, Glader B, et al, eds. Wintrobe's Clinical Hematology. 13th ed. Wolters Kluwer/Lippincott, Williams and Wilkins; 2014:728
9. Kipp BR, Roellinger SE, Lundquist PA, Highsmith WE, Dawson DB. Development and clinical implementation of a combination deletion PCR and multiplex ligation-dependent probe amplification assay for detecting deletions involving the human alpha-globin gene cluster. J Mol Diagn. 2011;13(5):549-557 doi:10.1016/j.jmoldx.2011.04.001
10. Harteveld CL, Higgs DR. Alpha-thalassemia. Orphanet J Rare Dis. 2010;5:13
11. Thein SL. The molecular basis of beta-thalassemia. Cold Spring Harb Persepct Med. 2013;1;3(5):a011700
12. Hein MS, Oliveira JL, Swanson KC, et al. Large deletions involving the beta globin gene complex: genotype-phenotype correlation of 119 cases. Blood. 2015;126:3374
13. Gallagher PG. Diagnosis and management of rare congenital nonimmune hemolytic disease. Hematology Am Soc Hematol Educ Program. 2015;2015:392-399
14. Koralkova P, van Solinge WW, van Wijk R. Rare hereditary red blood cell enzymopathies associated with hemolytic anemia - pathophysiology, clinical aspects, and laboratory diagnosis. Int J Lab Hematol. 2014;36(3):388-397

Performance

Method Description

A hematopathologist evaluates all results from the testing performed, and a summary interpretation is provided.

PDF Report

No

Day(s) Performed
Monday through Friday

Report Available
3 to 25 days

Performing Laboratory Location
Mayo Clinic Laboratories - Rochester Main Campus

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
Not Applicable

LOINC® Information

Test ID	Test Order Name	Order LOINC® Value
HAEV0	Hemolytic Anemia Summary Interp	59466-3

Result ID	Test Result Name	Result LOINC® Value
608090	Hemolytic Anemia Summary Interp	14869-2
608115	Reviewed By	18771-6