2018-03-12

Dear Customer:

Customer letter 2017-39 provided initial information regarding red blood cell (RBC) extended antigens (tested once) printing on our RBC end label. To recap, we are making a change that will allow us to automate a manual and time-consuming process that will in the large majority of cases, remove the need to manually apply a tag for tested once RBC extended antigens. The change will also improve the number of red blood cell (RBC) extended antigen results that will be part of the eye readable portion of the RBC end label. Please read customer letter 2017-39 for more details.

We have now received approval from Health Canada to proceed with implementation of this new labelling format. This change will be implemented on 2018-03-12.

RBC antigen testing is performed using an algorithmic approach for 11 common clinically significant red cell antigens (C, E, c, e, K, Fya, Fyb, Jka, Jkb, S, s). Additional antigen typing is also performed as required for specialized transfusion support, such as testing for low prevalence antigens to support transfusions in alloimmunized sickle cell anemia patients.

While the eye readable end label will only include antigens tested (once or twice) and found to be negative, the bar code information includes all tested antigens, including those that are positive. Some LIS systems may be able to translate the bar code data.

This phenotype information may be used to support transfusion for patients requiring antigen negative units for prophylaxis in prevention of alloimmunization, or when transfusing patients with allo antibodies, along with a serological crossmatch. Repeat phenotype testing at the hospital transfusion medicine laboratory is not required.

We recommend that you share a copy of this customer letter with relevant physicians at your hospital who should be made aware of this information. This customer letter can also be viewed at www.blood.ca in the “Hospitals” section. If you have questions about this letter, or if you require it in an accessible format, please contact your local hospital liaison specialist.

Sincerely,

Rick Prinzen
Chief Supply Chain Officer