

500 Chipeta Way, Salt Lake City, Utah 84108-1221

phone: 801-583-2787, toll free: 800-522-2787

Jonathan R. Genzen, MD, PhD, Chief Medical Officer

Patient Age/Sex:

Unknown

Specimen Collected: 13-Mar-24 13:40

AB Ident Panel-PEG (IRL) Procedure	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
PEG Panel Identification	Done		
AB Ident Panel-Solid Phase (IRL) Procedure	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
Solid Phase Panel Identification	Done		
Antibody Titer #2 (IRL) Procedure	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
Antibody Titer 2	Warm Auto		
Ab 2 Titer Current Specimen	< 2		
Ab 2 Date Previous Specimen	Not Done		
Ab 2 Titer Previous Specimen	Not Done		
Antibody Titer (IRL) Procedure	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
Antibody Titer 1	Anti-K (KEL1) ⁱ¹		
Ab 1 Titer Current Specimen	8		
Ab 1 Date Previous Specimen	Not Done		
Ab 1 Titer Previous Specimen	Not Done		
Antigen Testing, RBC Phenotype Extended	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
RBC Phenotype Extended	See Below ^{t1}		
Elution And Antibody Identification, RBC	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
Interp Elution	See Below ^{t2}		
RBC Antibody ID Prenatal-Reflex to Titer	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
ABORh	A Neg (weak D-) ^{f1}		
Direct Coombs	IgG+C3- * ^{f2}		[Negative]
Antibody Identification	See Below ^{t3}		
Selected Liquid Red Cell Panel Procedure	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
Selected Red Cell Panel	Done		
Warm Auto Adsorption Procedure	Received: 13-Mar-24 14:14 Result	Units	Report/Verified: 13-Mar-24 14:26 Reference Interval
NBR Warm Auto Adsorptions	1		

Interpretive Text

t1: 13-Mar-24 13:40 (RBC Phenotype Extended)

This patient appears to have the following red cell extended phenotype:

ce/ce K- Fy(a+b+) Jk(a-b+) S+s+

* = Abnormal, # = Corrected, C = Critical, f = Result Footnote, H = High, i = Test Information, L = Low, t = Interpretive Text, @ = Performing lab

Unless otherwise indicated, testing performed at:**ARUP Laboratories**

500 Chipeta Way, Salt Lake City, UT 84108

Laboratory Director: Jonathan R. Genzen, MD, PhD

ARUP Accession: 24-073-900174**Report Request ID:** 19129252**Printed:** 13-Mar-24 14:30

Page 1 of 2

Interpretive Text

t1: 13-Mar-24 13:40 (RBC Phenotype Extended)
 (ISBT) RH:-1,-2,-3,4,5 KEL:-1 FY:1,2 JK:-1,2 MNS:3,4

t2: 13-Mar-24 13:40 (Interp Elution)

The eluate was reactive with all cells tested showing no apparent specificity. This reactivity pattern is consistent with a warm autoantibody.

t3: 13-Mar-24 13:40 (Antibody Identification)
 Anti-K (KEL1) and a warm autoantibody were identified in this patient's serum. No additional red cell antibodies were apparent at this time.

A warm autoadsorption procedure removed the autoantibody reactivity revealing the underlying anti-K.

Anti-K is a clinically significant antibody capable of causing hemolytic disease of the newborn (HDNF) and transfusion reactions.

Clinical significance of warm autoantibodies may vary. Increased bilirubin, elevated reticulocyte values, and decreased haptoglobin may indicate immune hemolysis.

If red cell transfusion is required for mother or infant, donor units selected must be negative for the K (KEL1) antigen. The institution's policy for selecting and crossmatching units should be followed.

Result Footnote

f1: ABORh

This patient types as "weak D" Rh negative (RH:-1).

f2: Direct Coombs

IgG: Positive
 Complement (C3): Negative

Test Information

i1: Antibody Titer 1
 INTERPRETIVE INFORMATION: Antibody Titer 1

The titer result is the inverse of the highest dilution that has a positive reaction.

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Page 2 of 2