

TRANSPLANTATION AND IMMUNOGENETICS SERVICES



Sample Delivery (24 hours)

ASHI accreditation: 02-9-AU-01-1
NATA accreditation: 18808
Accredited for compliance with NPAAC
Standards and ISO 15189

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Sample and Volume Requirements

REQUEST FORM:

Request forms and sample labels must be completed accurately and have legible handwriting. Alternatively, the request form can be filled out online or a hospital label can be used. Ensure the request form contains a minimum of three forms of unique identifiers (e.g., full name, date of birth, UR/MRN, Medicare number).

Information on the form must match that on the sample tube(s).

Ensure that all tubes, at a minimum, are clearly labelled with:

- The patient's full name (family name and given names),
- Date of birth
- And date of collection, as indicated on the request form.

DELIVERIES:

Victorian Transplantation and Immunogenetics Service	NSW Transplantation & Immunogenetics Service	South Australian Transplantation & Immunogenetics Service
Australian Red Cross Lifeblood Melbourne Processing Centre 100 – 154, Batman Street, West Melbourne, VIC 3003 Phone: 03 9694 0354 DL-VICVTISAdmin@redcrossblood.org.au	Australian Red Cross Lifeblood Sydney Processing Centre Dock A – Blood Inwards 17 O'Riordan Street, Alexandria NSW 2015 Phone: 02 9234 2322 DL-NSWTTTCBO@redcrossblood.org.au	Australian Red Cross Lifeblood Women's and Children's Hospital Core Laboratory, Level 4, Rieger Building 72 King William Road, North Adelaide SA 5006 Phone: 08 8417 3000 tissuetypingsa@redcrossblood.org.au

SPECIMEN:

Samples (other than frozen samples) should be maintained at room temperature.

Samples for verification typing are to be collected on separate days wherever possible but must be collected at different collection time points.

Samples sent for crossmatching prior to living renal transplantation must be pre-booked. Please email the laboratory (see email address details above).

SOLID ORGAN TRANSPLANTATION

Registration for Transplant waiting list

Testing	Request	Collection tube
TWL Work-up	TWL- entry	2x ACD
	Initial/ verification	1x SST
Serum sample for solid organ	Monthly serum	1x SST
	Pre-transplant serum	
	Post-transplant investigation (DSA) AT1R	

For paediatric volumes please contact the lab

Live Organ transplant workup (LDD)

Testing	Request	Collection tube
Recipient	Initial and verification (Stage 1 and 2)	3x ACD
		1x SST
Recipient	Final Crossmatch (Stage 3)	1xSST
Recipient	Lymphocyte Crossmatch only (on request)	3x ACD
		1x SST
Live Donor	Initial and verification (Stage 1 & 2)	3x ACD
Live Donor	Final Crossmatch (Stage 3)	3x ACD
Live Donor	Cell storage for KPD	5 x ACD

STEM CELL TRANSPLANTATION

Testing	Request	Collection tube
Initial patient testing	Initial	2x ACD or EDTA
Related donor testing	Family members	2x ACD or EDTA
Verification patient testing (VT)	Verification	2x ACD or EDTA
		1x SST
Verification-related donor testing	Verification	2x ACD or EDTA
		1x SST
Antibody testing only		1x SST

Paediatrics: 1ml ACD/birth to 8yo (+ 0.5 mL serum for patients at VT)

IMMUNOGENETICS

Testing	Request	Collection tube
Disease Association		1x ACD or EDTA
Drug Hypersensitivity	Initial and verification	1x ACD or EDTA

PLATELET AND NEUTROPHIL IMMUNOLOGY

Please refer to specific forms for sample requirements:

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