



Requesting physician:

Patient:

Request form HLA typing for HSCT

- | | |
|--|--|
| <input type="checkbox"/> Recipient typing HSCT (first typing)
HLA-A*, -B*, -C*, -DRB1*, -DQB1*, DPB1* high resolution | material: 10ml EDTA blood
(Profil 1) |
| <input type="checkbox"/> Recipient typing HSCT (verification typing)
HLA-A*, -B*, -C*, -DRB1*, -DQB1*, DPB1* high resolution | material: 10ml EDTA blood
(Profil 2) |
| <input type="checkbox"/> Typing of members of the immediate family (first typing)
HLA-A*, -B*, -C*, -DRB1*, -DQB1* low resolution
If identity with patient, in addition:
HLA-A*, -B*, -C*, -DRB1*, -DQB1*, DPB1* high resolution | material: 10ml EDTA blood
(Profil 3) |
| <input type="checkbox"/> Typing of members of the immediate family (verification typing)
HLA-A*, -B*, -C*, -DRB1*, -DQB1*, DPB1* high resolution | material: 10ml EDTA blood
(Profil 9) |

- | | |
|--|---|
| <input type="checkbox"/> Recipient before HSCT
anti HLA antibodies (Solid phase assay Luminex + CDC) | material: 5ml serum
(Profil 7 vor TX KMT) |
| <input type="checkbox"/> Crossmatch before HSCT
Crossmatch with donor | material:
5ml serum of recipient +
3ml Lithium heparin blood of the
donor |
| <input type="checkbox"/> Recipient after HSCT
anti HLA antibodies (Solid phase assay Luminex) | material: 5ml serum
(Profil 7 nach TX KMT) |

Do not cool or centrifuge lithium heparin blood. Samples must be in the lab within 24 hours!

Diagnosis:

Sampling date / time:

Signature: