5

Platelet Serology

Patient (mother for FNAIT)

Surname + initials: . . . . . .

d.o.b (dd-mmm-yyyy).: . . . . . .

Address: . . . . . .

Postal code + City: . . . . . .

Country: . . . . . .

Date and time of sample: . . . . . .

Your reference/lab number: . . . . . Your patientnumber . . . . . .

Report to be sent to:

Name treating physician: . . . . . .

Hospital name: . . . . . .

Department . . . . . .

Address: . . . . . .

Postal code/City: . . . . . .

Country: . . . . . .

Invoice to be sent to:

Hospital Name: . . . . . .

Address: . . . . . .

Postal code/City: . . . . . .

Country: . . . . . .

Fetal/neonatal alloimmune thrombocytopenia (FNAIT) ☐

Name father:……..

DOB father: ……(dd-mmm-yyyy)

If post-natal:
Name neonate:……..

DOB neonate:…… (dd-mmm-yyyy)

Sample requirements	Shipment restrictions
Mother: 40 mL EDTA unclotted blood 10 mL clotted blood	Room temperature Arrival within 48 hours
Father: 40 mL EDTA unclotted blood	
If post-natal: Neonate: 1 mL EDTA unclotted blood	

Non-invasive Fetal Genotyping with maternal plasma ☐

Fetal genotyping	Minimal age of gestation	Sample requirements	Shipment restrictions
HPA-1a	>17 weeks but preference ≥ 19 weeks negative result repeated >20 weeks	Mother: 30 mL EDTA Father : 10 mL EDTA	Arrival within 24 hours Ship at room temp.

HPA-1, -2, -3, -5, -15 Genotyping ☐

Sample requirements	Shipment restrictions
8 mL EDTA unclotted blood	2-8ºC Arrival within 5 days

Refractoriness for platelet transfusions ☐

HLA-class I antibodies ☐
HLA-class I typing ☐
HPA antibodies ☐
HPA typing ☐

Sample requirements	Shipment restrictions
16 mL EDTA unclotted blood 16 mL clotted blood	2-8ºC Arrival within 72 hours

Please inform us by mail or phone before sending the blood
Please make sure the blood will not arrive on Friday-Sunday

Shipping address:
UDC
Sanquin Diagnostic Services
Dept of Immunohematology Diagnostics (Q234)
Plesmanlaan 125
1066 CX Amsterdam
The Netherlands
P: +31205123379
F: +31205123685
Mail: Trombo-leukocytenserologie@sanquin.nl

Please turn over

Sanquin

IH-D
Sanquin Diagnostic Services
Plesmanlaan 125
1066CX Amsterdam
The Netherlands
P: +31205123379
F: +31205123685

Version 2019

*Extra information: Medical relevant information on the patient / deviating primary sample.

Extra information*:.....

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Privacy / AVG:
For more information about the privacy regulation (AVG in Dutch, GDPR in English), please see our website: www.sanquin.org.

Use of residual material for research
We may use residual, anonymized, patient material to optimize diagnostic tests to the benefit of patients. This can include validation, equipment calibration or scientific research. Sanquin implicitly assumes that the patient does not object to this use when receiving material for diagnostic testing.
According to the stringent Dutch Law, the health care professional is responsible for assuring that the patient agrees to the above (as mentioned in the 'no-objection clauses' in the Dutch law referred to as WGBO, Medical Treatment Contracts Act) and to inform us **immediately** of any objections before or after the material has been sent to Sanquin. Please, contact the management of Sanquin Diagnostic Services if your patient objects to this use of the material, or if you think that your patient could object; phone +31 20 5123479 or e-mail diagnostic.services@sanquin.nl