



Seeing Beyond Limits

To Boldy Go . . .

A journey from the Immunohematology test tube to DNA Testing and Beyond



Objectives

- Examine and resolve a complex ABO Forward Type/Reverse Grouping Discrepancy
- Recall career opportunities in transfusion medicine today
- Discuss career opportunities ranging from hospital transfusion services to those in manufacturing, research and development and regulatory environments

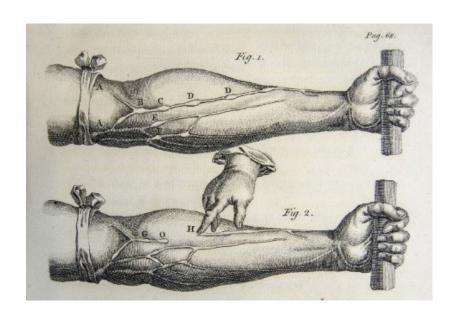




Where We Have Been

1628

British physician
William Harvey
discovers the
circulation of blood.
The first known blood
transfusion is
attempted soon
afterward.



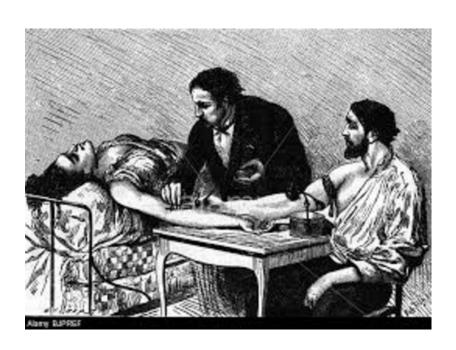




Where We Have Been – cont'd

1818

British obstetrician James Blundell performs the first successful transfusion of human blood to a patient for the treatment of postpartum hemorrhage.



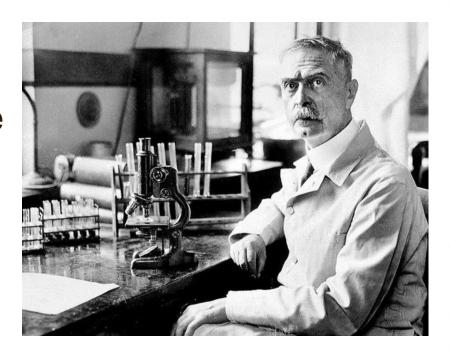




Where We Have Been cont'd

1900

Karl Landsteiner, an Austrian physician, discovers the first three human blood groups, A, B, and C. Blood type C was later changed to O.







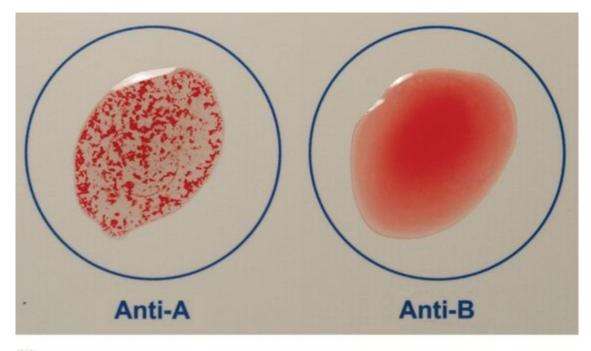


ABO Forward Typing & Reverse Grouping Discrepancy





ABO Typing Options - Slide

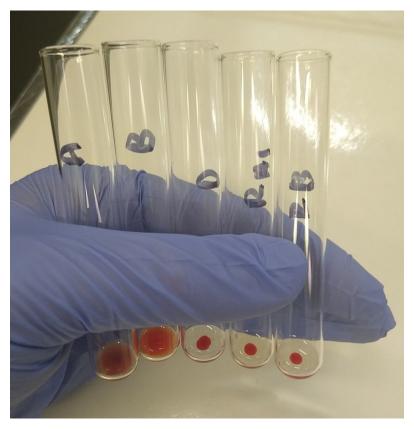








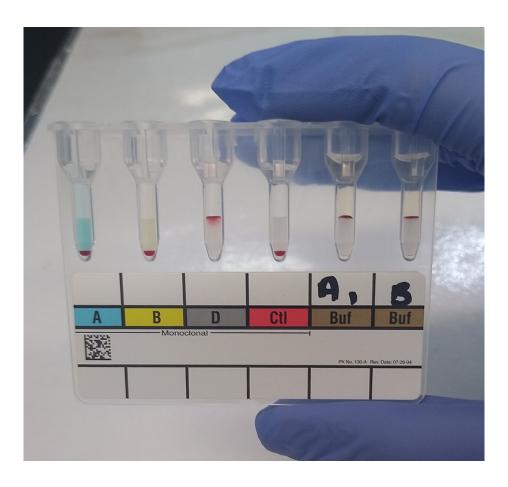
ABO Typing Options - Tube







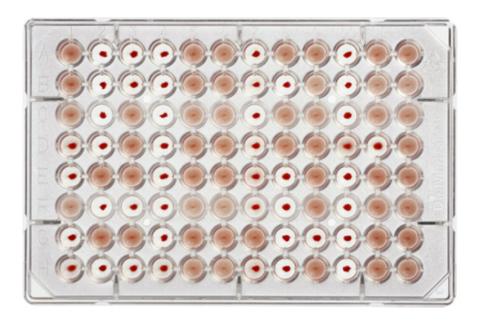
ABO Typing Options – Gel Column







ABO Typing Options – Microwell







ABO Typing Reagents

- Anti-A
- Anti-B
- Anti-A,B
- Anti-A₁
 Lectin/Monoclonal

- A₁ Cells
- B Cells
- O Cells
- A₂ Cells
- Group O Screening Cells





Case Study

 Type and Screen ordered on a pregnant patient in the ER

 Patient fell off a ladder while washing pollen off of the windows of her house

- First pregnancy
 - 4 months into pregnancy with no complications
- No previous records
- Medications
 - Iron supplement only





Type and Screen Results

Anti-A	Anti-B	Anti-D	A ₁ Cells	B Cells	
4+	0	3+	1+	3+	

Interpretation:

ABO Type:

Rh Type:





Type and Screen Results

Anti-A	Anti-B	Anti-D	A ₁ Cells	B Cells	
4+	0	3+	1+	3+	

Interpretation:

ABO Type: ???

Rh Type:





Type and Screen Results

Anti-A	Anti-B	Anti-D	A ₁ Cells	B Cells	
4+	0	3+	1+	3+	

Interpretation:

ABO Type: ???

Rh Type: Positive





Antibody Screen Results – Tube Testing

Screening Cell	37/LISS	Anti-IgG	Checkcell	Interpretation
1	0	0	2+	Negative
2	0	0	2+	Negative
3	0	0	2+	Negative

0 No agglutination/No Hemolysis 1 – 4+ Agglutination

Interpretation: Negative





Problem

Anti-A	Anti-B	Anti-D	A ₁ Cells	B Cells	
4+	0	3+	1+	3+	

Sample forward types as a group A

Sample reverse groups as a group O

Observation:

The reaction against the A₁ Cells is 1+







The Mystery is Afoot







Next Steps

ACTION	REASON
Repeat the testing with the same sample	To exclude the possibility of a technical error during testing
Wash the RBCs and retest	Removes possible interference from suspended RBCs caused by abnormal concentrations of proteins or infused macromolecular solutions
Test for unexpected RBCs reacting at Room Temperature	Room Temperature antibodies may react with the reverse grouping

Repeat Testing with Patient's Washed RBCs

Anti-A	Anti-B	Anti-D	A ₁ Cells	B Cells	
4+	0	3+	1+	3+	





Now What? What about a subgroup of A?

- 1. Type patient's Cells with Anti-A₁ Lectin
- 2. Reverse group the patient's plasma against A₂ Cells

Anti-A	Anti-B	Anti-D	Anti-A ₁	A ₁ Cells	B Cells	A ₂ Cells
4+	0	3+	0	1+	3+	0

Patient is A₂



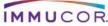


Have we solved our mystery? (Resolved the ABO Discrepancy?)



Is this patient an A₂ individual with an Anti-A₁ causing the reverse group discrepancy?

Have we followed all of the clues and ruled out the basic possibilities?



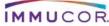


Have we solved our mystery? (Resolved the ABO Discrepancy?)



What about the AABB guidance?

"Test for unexpected RBCs reacting at Room Temperature"





Review the Antibody Screen

Screening Cell	37/LISS	Anti-IgG	Checkcell	Interpretation
1	0	0	2+	Negative
2	0	0	2+	Negative
3	0	0	2+	Negative

Screening Cell	Immediate Spin
1	1+
2	2+
3	0





The Antigen List of the Antibody Screen

			OSCRE er List	EN																												412-13	
EEN	_		COR, INC. Norci ENSE NO: 886	ross, GA 30071 U	SA																											 	EEN
SCR	V		O: 02416 ES: 2021/03/19)			Rh	- H	r		L		ŀ	Kell			Du	ıffy	Ki	dd	Le	wis	Р		MN	١		Lutl era		Xg			8
ő	A		Donor	•	n	_	_	_	٩	C*	K	L.	L'mi	V∞b	Jsª*	lab.	E. a	E. 6	Ita	Ind	1 00	Lab	P.	М	N		s L		b	V8*			PANOSC
Ä		Barcode #	Add'l Typings	Rh Donor ID				_	-	Ů.	K	K	кр	кp	Js	JS	гу	гу	JK	JK	Le	Le	' 1	IVI			5 L	.u- i	Lu	∧g-			Ā
"	ı	198416		R1R1 B10123	+	+	0	0	+	0	0	+	0	+	0	+	+	0	0	+	0	+	0	+	+	0	+	0	+	+			٦.
	II	298416	Yt(b+)	R2R2 C4053	+	0	+	+	0	0	0	+	0	+	0	+	0	+	+	0	0	+	+	+	0	+	0	0	+	0			
Ī	II	398416		rr G1692	0	0	+	0	+	0	+	+	0	+	0	+	0	+	+	+	+	0	+	0	+	0	+	0	+	+			

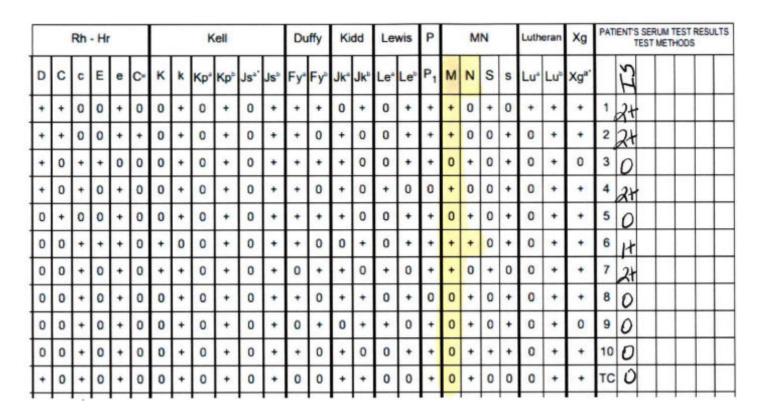
^{*} Indicates those antigens whose presence or absence may have been determined using only a single example of a specific antibody.

An antigen designated with a 'w' represents a weakened expression of the antigen that may or may not react with all examples of the corresponding antibody.

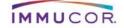




Immediate Spin Antibody Panel



Appears to be Anti-M showing dosage





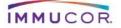
Does the Antibody Screen Demonstrate an Anti-M?

PANOSCREEN Master List IMMUCOR, INC. Norcross, GA 30071 USA PANOSCREEN US LICENSE NO: 886 LOT NO: 02416 Luth-Rh - Hr Kell Duffy Kidd Lewis eran EXPIRES: 2021/03/19 **Donor** Barcode # Add'l Typings Rh Donor ID R1R1 B10123 0 0 0 0 198416 298416 Yt(b+) R2R2 C4053 **III** 398416 rr G1692

* Indicates those antigens whose presence or absence may have been determined using only a single example of a specific antibody.

An antigen designated with a 'w' represents a weakened expression of the antigen that may or may not react with all examples of the corresponding antibody.

Screening Cell	Immediate Spin
1	1+
2	2+
3	0





Is the reactivity on the A₁ Cells due to Anti-A₁ or Anti-M?

Anti-A	Anti-B	Anti-D	Anti-A ₁	A ₁ Cells	B Cells	A ₂ Cells
4+	0	3+	0	1+	3+	0







Additional Testing

Cell Tested	Anti-M	Interpretation
Patient Cells	0	M negative
A1 Cells (Reverse Group)	4+	M positive
A2 Cells (Reverse Group)	0	M negative
B Cells (Reverse Group)	0	M negative

Anti-A	Anti-B	Anti-D	Anti-A ₁	A ₁ Cells	B Cells	A ₂ Cells
4+	0	3+	0	1+	3+	0





Test More A₁ Positive Cells with Anti-M

Cell ID	Anti-M	Interpretation
555	0	M negative
777	0	M negative
999	0	M negative





Test Patient Plasma Against M Negative A₁ Positive Cells

Cell ID	Anti-M	Interpretation	Patient Plasma
555	0	M negative	0
777	0	M negative	0
999	0	M negative	0

Anti-A	Anti-B	Anti-D	A ₁ Cells*	B Cells
4+	0	3+	0	3+

* M negative Cells

Interpretation: Patient is an A Positive

Screen: Anti-M reactive at Room Temperature Only





Sherlock says, "Elementary, dear friend, elementary"

Skills you used:

- Critical Thinking
- Investigative Reasoning
- Problem Solving
- Logic
- An many more . . .









DNA and Transfusion Medicine

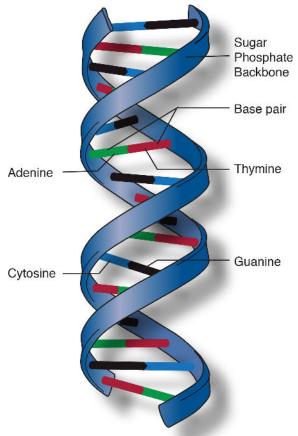




Phenotype

Observable expression of a gene

Presence or absence of antigens on RBCs as determined by serologic testing represents a person's phenotype



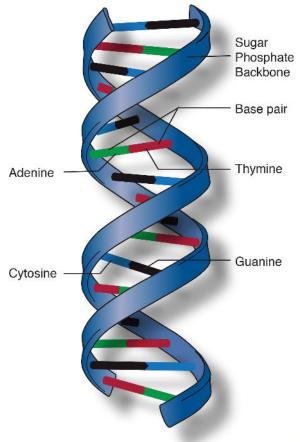




Genotype

The set of genes inherited from a person's parents

Presence or absence of antigens on RBCs predicted by DNA-based testing





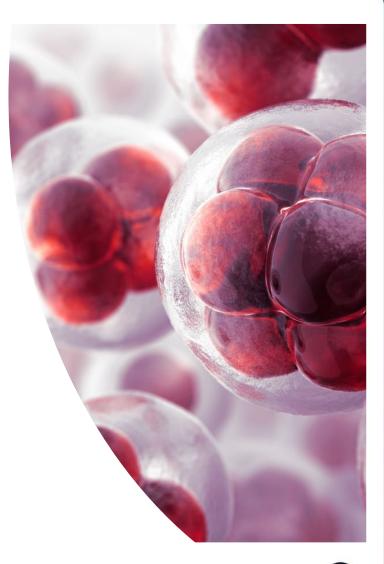


Phenotype vs Genotypes of Blood Groups

A person may phenotypically "type" as a group A individual. This would be their phenotype.

However, that A individual may genetically be a Group AA or a Group AO where the O blood group antigen is not detected by serological methods. This is an example of a genotype.







Molecular Methods for Predicting RBC Antigen Phenotypes

- Genomic DNA is isolated from any nucleated cell source
- Most DNA-based
 assays involve
- assays involve amplification of a target gene sequence through PCR

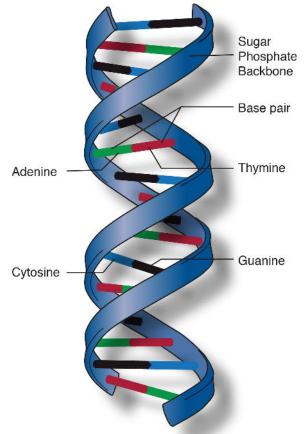
- PreciseType™
 - BioArray/Immucor
 - FDA Approval 21MAY2014
- ID CORE XTTM™
 - Progenika/Grifols
 - FDA Approval 110CT2018





Clinical Application of DNA-Based Molecular Testing

- Predict RBC
 phenotypes of a fetus
 or a transfusion
 recipient whose
 RBCs are coated with
 IgG
- Reliable Blood Group Determination in Recently Transfused Patients

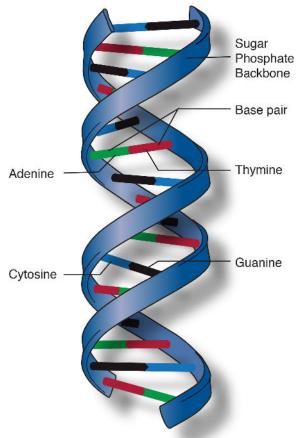






Clinical Application of DNA-Based Molecular Testing - Continued

- Aids in differentiation between alloantibodies and autoantibodies
- Predicts phenotypes in patients where monoclonal antibodies are used as therapeutic treatments



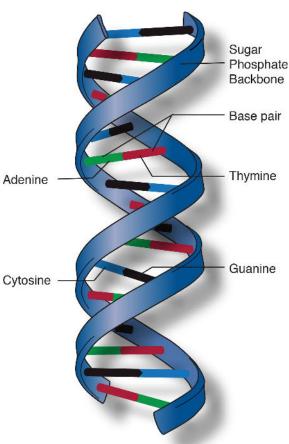




Additional Applications of Molecular Testing in Transfusion Medicine

Research Use Only (RUO)

- Platelet Genotypes
- Rh Variants
- ABO subgroups and variants









Career Opportunities in Transfusion Medicine





- Transfusion Service Technologists
- Transfusion Service Managers
- Quality Improvement Managers
- Blood Bank Information Systems (Computer Systems)
- Donor Center Blood Collection and Processing
- Immunohematology Reference Lab Technologists





- Instrumentation
 - Viral Testing in Donor Centers
 - Automated Blood Analyzers Field Service Engineers and Application Specialists
 - Immucor
 - Ortho
 - Grifols
- Microbiology
 - Sterility testing for Blood Bank Manufacturing for reagents and test kits
 - Cultures of Room Temperature Platelet Products





Molecular Testing

- PCR Testing
- DNA Extraction
- Assay Development
- Research and Development Opportunities

Technologist in Molecular Biology (MB) by ASCP





Regulatory Environments

















Beyond the Test Tube - Tomorrow

The skills you just demonstrated while resolving our ABO blood typing discrepancy will be the ones that you will use as you head toward the future:

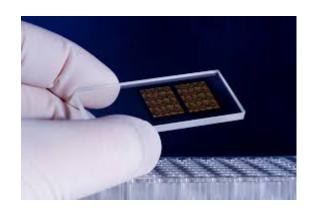
- Critical Thinking
- Investigative Reasoning
- Problem Solving
- Logic





Beyond the Test Tube - Tomorrow

Microarrays



- Blood grouping
- Extended phenotyping
- Antibody detection
- Exclusion of other clinically significant antibodies
- Donor disease screening





Beyond the Test Tube - Tomorrow

The potential, your potential, is not bound to a test tube. You have the tools necessary to take us to the next steps in Immunohematology!





References

- AABB Technical Manual, 20th edition
- Standards for Blood Banks and Transfusion Services, 32nd edition



