Canine Patient Cross Match - IDEXX Service



Please supply the DEA 1 status (+/-) of your patient when requesting a canine cross match.

- Please collect 0.5ml EDTA and 3 tubes of separated serum (1.5ml) as indicated on the IDEXX 'Canine Cross Match Request Form Recipient' FRM/TES/03 from your patient.
- Complete the form and send it with the samples to IDEXX Laboratories Wetherby using the address given.
- Please use the IDEXX drop box service (if available at your practice) or a guaranteed before 9am next day delivery service. The cost of delivery will be deducted from the cross match charge by IDEXX.
- Please mark on the envelope in large letters 'urgent cross match sample' and highlight
 this with a highlighter pen to help the IDEXX team identify the package as soon as it
 arrives.
- Please be aware that failure to ensure your samples arrive the next day will delay the cross match service. If using Royal Mail, please note that most post offices close by 5pm.
- Please call Pet Blood Bank on 01509 232 222 before 4pm on the day you plan to send your samples to IDEXX with your patient's details so that donor blood can be sent to IDEXX from our facilities in Loughborough.
- Please call IDEXX on 0203 788 7508 to inform them a cross match sample is being sent and when they can expect it to be delivered e.g. before 9am.

Pet Blood Bank will send aliquots of blood from multiple donated units of packed red blood cells to IDEXX for testing. There is an administration fee for this service, which can be found on the price list on our website.

IDEXX Laboratories will cross match your patient's blood with the donated units and provide the results indicating each unit's compatibility to you directly on the email address provided. The fee for this service is charged to you by IDEXX Reference Laboratories. Please ensure you have an active Reference Laboratory account to facilitate reporting and invoicing. Prices can increase if the blood type of the recipient is incorrectly indicated as this will lead to further testing being needed.

Once a veterinary surgeon in your practice has reviewed the results, please complete our specific <u>Canine Cross Match Unit Request Form</u> for the compatible unit(s) you would like to order. <u>Take</u> care to transfer the ID number of the unit(s) correctly when completing this form. For guidance on reviewing the cross match results please see below.

If Pet Blood Bank received your order before 3pm on the day of the cross match, we will be able to send you any requested compatible units on a next day delivery service as detailed below:

Before 9am (if available in your area) Before 10.30am Before 12pm Saturday delivery

The cost of delivery can be found on our price list, or please ask a member of staff for more details.

Alternatively, we offer a same day delivery service charged per mile. Please contact us for a quote.

If none of the tested units are compatible, inside of standard business hours you can raise a ticket on our <u>Vet Helpdesk</u>. Please attached all relevant blood results and one of our Advisors will get back to you. For urgent enquiries outside of business hours, please call us on 01509 232 222.

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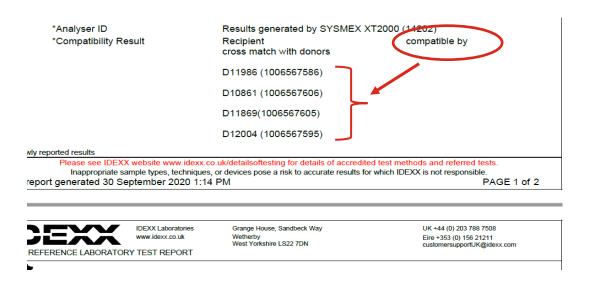
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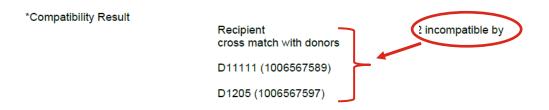


The results will be sent to the email address you provided on the Canine Cross Match Request Form and if you have an account with IDEXX the results may be sent to the email addresses that are registered to your existing account. The results are presented in PDF format and generally will be in a similar format to other external laboratory results.

The haematology and blood film results will appear first, followed by the cross match results. The result will appear for each unit in turn identified using their D number with the compatible units appearing first followed by any incompatible units.

Please be aware that due to the format of the results generated by the automated analyser a page break may separate the results as shown here, so please ensure you scroll to the end of the document.





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Where there are no compatible units at all, the degree of incompatibility will be reported against each unit. The units are ordered with the **least incompatible unit first** to the most incompatible unit last and may also be separated by a page break.

Results generated by SYSMEX XT2000 (14202) *Analyser ID *Compatibility Result Recipient I incompatible by cross match with donors: Donor D11016 (1006567824) 20'(-) Agglutination 37' (-Least incompatible) Agglutination Coombs (NEG) Haemolysis (++) Donor D10774 (1006567828) 20'(-) Agglutination 37' (-) Agglutination Coombs (NEG) Haemolysis (++) TEST RESULT UNITS **REF.INTERVAL** *Compatibility Result Donor D11951 (1006567829) 20'(-) Agglutination 37' (-) Agglutination Coombs (POS) Haemolysis (++) Donor D9365 (1006567825) 20'(-) Agglutination 37' (-) Agglutination Coombs (POS) Haemolysis (++) Donor D9374 (1006567826) 20'(VIS) Agglutination 37'(VIS) Agglutination Coombs (POS) Haemolysis (++) Donor D9586 (1006567827) 20'(VIS) Most incompatible Agglutination 37'(VIS) Agglutination Coombs (POS) Haemolysis (++)

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CANINE CROSS MATCH REQUEST FORM FOR PET BLOOD BANK UK - RECIPIENT			
<u>Lab Number</u>	Date	Name and Address of Recipient Owner	For Lab Use
	Veterinary Surgeon		Only
	veterinary Surgeon		□ EDTA
Copy to P273 and orders@petbloodbank uk.org	Address Stamp	Name of Recipient	- □ SEP SERUM
		Breed of Recipient	
Vet Code		Date of Birth OR Age of Recipient	
	Practice/surgeon's email address for Cross Match results: **	Sex of Recipient	
		Neutered or Entire - Recipient	-
** Failure to provide the correct email address on this form will delay the cross match			
CODE TEST DESCRIPTION MINIMUM SAMPLE REQUIREMENTS			
VNXM Cross Match 0.5 ml EDTA			
G. 655 M. G. 655		Preferably 3 x Plain Serum Tubes	
or 3 x Serum Gel Tubes			
		N.B Please centrifuge gel tubes for 20 minut	es after
sampling			
Please submit samples by Guaranteed Mail to ensure prompt delivery and processing.			
The cost of this service will be deducted from the test charge. Submission of samples in the normal post may result in a delay in processing.			
*An additional cross matching charge may be applied if the recipient Blood Type			
supplied is incorrect			
Current Haemolysis or Agglutination Suspected?			NO
Blood Type if known –	DEA 1*	POS	NEG
Any previous transfusions given? – Please add detail such as number / blood			
type ii known iii the comment box below			NO
Current PCV if known			
Diagnosis:			
Any relevant history or clinical findings:			

The information provided on this form will be shared between IDEXX Laboratories and PBBuk according to both companies R&D policies and Terms and Conditions of Service.

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