|  |
| --- |
| **ANTIGEN TYPINGS** |
|  |  |  |  |  |  |  |  |
| **PATIENT** |  | **DAT:**  | **Anti- IgG:** | **Anti-C3:** | **Control:** |
| **ID NUMBER** |  | **Transfused or pregnant in last three months?** |
| **DATE** |  |  |  |  | **TECH**  | Set-up | Read |
| **Type of sample used:** | EDTA: | Eluted cells: Method: |  |  | Comments: |
| **ANTISERA USED** | **LOT #** | **EXP DATE** | **POS CONTROL** | **NEG CONTROL** | **PATIENT** | **UNITS** |
|  |  |  |  |  |  | **UNIT #** | **RESULTS** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |