

Reporting Title: Newborn ABORh

Performing Location: Rochester

Specimen Requirements:

Container/Tube: Pink top (EDTA Micro tube)

Specimen Volume: 0.5 mL

Collection Instructions:

1. Invert several times to mix blood.
2. Send whole blood specimen in original tube. **Do not aliquot.**

Specimen Type	Temperature	Time	Special Container
Whole Blood EDTA	Refrigerated (preferred)	10 days	
	Ambient	4 days	

Result Codes:

Result ID	Reporting Name	Type	Unit	LOINC®
ABONR	Newborn ABORh	Alphanumeric		19057-9

LOINC® and CPT codes are provided by the performing laboratory.

Supplemental Report:

No

CPT Code Information:

86900

86901

Reflex Tests:

Test Id	Reporting Name	CPT Units	CPT Code	Always Performed	Available Separately
ABIDR	Antibody Identification, RBC	1	86870	No	Yes

Result Codes for Reflex Tests:

Test ID	Result ID	Reporting Name	Type	Unit	LOINC®
ABIDR	ABDR1	Antibody Identification, RBC	Alphanumeric		888-8

Reference Values:

ABO and Rh blood group antigens identified