

SeraScreen FCT 60 Frozen Cell Trays

Vertreib/Distributor: BAG - Biologische Analysensystem GmbH · Amtsgerichtsstraße 1-5 · D-35423 Lich · Telefon: 0 64 04/9 25 - 0 · Telefax: 0 64 04/9 25 - 350

LOT NO.: **S60503**
EXP. DATE: **Aug 2005**

PATIENT NAME _____
HLA PHENOTYPE _____
PATIENT ID# _____
SERA ID# _____
DATE OF BIRTH _____

DATE COLLECTED: _____
DATE TESTED: _____ BY: _____
DATE READ: _____ BY: _____
COMPLEMENT: _____
TEST METHOD: _____

ANTIGEN DISTRIBUTION	
A1	6
A2	24
A3	7
A11	10
A23	3
A24	9
A25	2
A26	5
A28	5
A29	3
A30	10
A31	2
A32	2
A33	6
A34	2
A36	2
A6601	1
A68	6
A69	2
A74	3
A80	1
B7	3
B8	3
B13	2
B18	7
B27	3
B35	6
B37	6
B38	4
B39	3
B41	1
B42	4
B44	5
B45	2
B46	2
B47	2
B48	1
B49	6
B50	2
B51	4
B52	4
B53	3
B55	3
B56	2
B57	7
B58	2
B60	3
B61	3
B62	2
B63	4
B64	2
B65	6
B70	3
B71	1
B72	2
B75	1
B78	1
B81	3
Cw 1	5
Cw 2	8
Cw 3	10
Cw 4	10
Cw 5	2
Cw 6	17
Cw 7	19
Cw 8	8
Cw10	1
Cw14	1
Cw15	1
Cw17	1

PANEL ID#	RACE	HLA A,B,C, PHENOTYPE								WELL ID	REACTIONS		PANEL ID#	RACE	HLA A,B,C, PHENOTYPE								WELL ID	REACTIONS		
		A	A	B	B	Cw	Cw	Bw4	Bw6		CONTROL	TEST			A	A	B	B	Cw	Cw	Bw4	Bw6		CONTROL	TEST	
3280	H	1		18	50	2	6		6	1A			3562	C	11	26	18	56	1			6	7A			
3220	B	1	30	81	57	6		4	6	1B			3363	A	11	24	13	52	6		4		6	7B		
3841	C	1	2	8	37	6	7	4	6	1C			2518	C	11	33	65	52	8		4	6	7C			
9101	A	1	3	37	51	6		4	6	1D			9135	C	11		50	55	3	6		6	7D			
9226	O	1	11	56	35	1	4		6	1E			9195	B	11	74	37	18	2	6	4	6	7E			
9224	B	1	29	44	53	4		4	6	1F			9222	O	11	74	51	46	1	7	4	6	7F			
3471	C	2	28	64	27	2	8	4	6	2F			9219	B	74	32	64	72	2	8		6	8F			
3397	B	2	80	57	63	5	7	4		2E			3531	B	23	68	63	72	2	5	4	6	8E			
3810	B	2	30	42	53	4		4	6	2D			9217	B	24	33	41	57	6		4	6	8D			
9127	O	2	24	46		1	4		6	2C			9129	A	24	28	61	70	7			6	8C			
3587	B	2	36	81	65	8			6	2B			9133	C	24	29	38	35	4		4	6	8B			
9117	C	2	23	8	49	7		4	6	2A			9118	B	24	33	27	48	2	8	4	6	8A			
3451	B	2	68	37	49	2	7	4		3A			1080	C	24	25	37	55	3	6	4	6	9A			
9128	H	2		7	49	7	4	6	6	3B			9209	C	26	32	57	49	6		4		9B			
3512	C	2		7	62	3	8		6	3C			3600	A	26		52	70			4	6	9C			
9126	B	2	30	62	39	3			6	3D			3798	B	28	30	44	75	3		4	6	9D			
9111	C	2	69	65	57	7		4	6	3E			2592	B	68	30	57	35	4		4	6	9E			
9161	C	2	24	60	44	3		4	6	3F			3470	B	68	36	78	13	8		4	6	9F			
9114	A	2	11	51	61			4	6	4F			9160	C	68	31	35	63	4	7	4	6	10F			
9122	H	2	28	65	39				6	4E			9206	B	68	6601	7		7	15		6	10E			
9138	C	2	11	27	49	1	7	4		4D			9131	H	30		39	70	3	7		6	10D			
3544	B	2	33	8	45	7			6	4C			9119	B	30		65	58	6		4	6	10C			
9189	B	2	33	63	42	14	17	4	6	4B			9188	B	30	34	45	81	6			6	10B			
9105	C	2	26	49	38	7		4	6	4A			3542	B	33	34	35	53	4		4	6	10A			
3491	C	2		38	60	7	10	4	6	5A																
9115	B	2	30	42	57	6	7	4	6	5B																
9193	H	2	31	18	37	6	7	4	6	5C																
9166	C	2	25	18	60	3	7	4	6	5D																
3387	B	2	30	42	51	2		4	6	5E																
3576	B	3	23	18	71	3			6	5F																
9175	C	3	28	55	47	3	6	4	6	6F																
3422	B	3	69	58	44	4		4		6E																
9147	C	3	26	38	47	6			4	6D																
9137	H	3	24	65	35	4	8		6	6C																
3545	C	3	29	44	18	7		4	6	6B																
9191	A	11		52	61	6		4	6	6A																

ANTI-HLA ANTIBODY ASSIGNMENT				ETHNIC ORIGIN			
POSSIBLE SPECIFICITY				B= AFRICAN AMERICAN C= CAUCASIAN H= HISPANIC A= ASIAN AI= AMERICAN INDIAN U= UNKNOWN M= MULTI-RACIAL O= ORIENTAL			
# ANTIGENS/PANEL							
TRUE POSITIVE +/-							
FALSE NEGATIVE +/-							
FALSE POSITIVE +/-							
TRUE NEGATIVE +/-							
% POSITIVE							
% STRENGTH POSITIVE							
R-VALUE							
SPECIFICITY ASSIGNMENT							
BY: _____				DATE: _____			

CELL	WELL	COMMENTS
9105	4A	VIABILITY OF THE CELLS IN THIS WELL MAY BE LESS THAN 80%.
3387	5E	
3363	7B	
3798	9D	
		*CARE SHOULD BE TAKEN IN ASSIGNMENT OF ANTIBODY BASED UPON THESE CELLS.

