

Patient 1

Exercise code		PRN		Sample Quality	Satisfactory	Unsatisfactory	Date samples	
							received	tested
							/ /	/ /

D	Cc	Ee	MN	Ss	Kk	Fya Fyb	Fy	Jka Jkb	Doa Dob
Genotype									
<i>RHD*01</i> (zygosity not determined)	<i>RHCE*C/C</i>	<i>RHCE*E/E</i>	<i>GYP A*01/01</i>	<i>GYP B*03/03</i>	<i>KEL*01/01</i>	<i>FY*01/01</i>	GATA mutation not present	<i>JK*01/01</i>	<i>DO*01/01</i>
<i>RHD*01N.01/01N.01</i>	<i>RHCE*C/c</i>	<i>RHCE*E/e</i>	<i>GYP A*02/02</i>	<i>GYP B*04/04</i>	<i>KEL*02/02</i>	<i>FY*02/02</i>	Homozygous for GATA mutation (<i>FY*02N.01</i>)	<i>JK*02/02</i>	<i>DO*02/02</i>
<i>RHD*01/01</i>	<i>RHCE*c/c</i>	<i>RHCE*e/e</i>	<i>GYP A*01/02</i>	<i>GYP B*03/04</i>	<i>KEL*01/02</i>	<i>FY*01/02</i>	Heterozygous for GATA mutation	<i>JK*01/02</i>	<i>DO*01/02</i>
<i>RHD*01/01N.01</i>									
Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested
Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)

Predicted phenotype									
D positive	C+ c-	E+ e-	M+ N-	S+ s-	K+ k-		Fy(a+b-)	Jk(a+b-)	Do(a+b-)
D negative	C+ c+	E+ e+	M- N+	S- s+	K- k+		Fy(a-b+)	Jk(a-b+)	Do(a-b+)
	C- c+	E- e+	M+ N+	S+ s+	K+ k+		Fy(a+b+)	Jk(a+b+)	Do(a+b+)
							Fy(a-b-)	Jk(a-b-)	Do(a-b-)
Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested
Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)

How would you report the genotype / predicted phenotype for Patient 1 in clinical practice									
Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above
Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)

Please complete both pages and then email to BTLP@ukneqas.org.uk

Please indicate appropriate response for each test and complete the top section

Patient 2

Exercise code		PRN		Sample Quality	Satisfactory	Unsatisfactory	Date samples	
							received	tested
							/ /	/ /

D	Cc	Ee	MN	Ss	Kk	Fya Fyb	Fy	Jka Jkb	Doa Dob
Genotype									
<i>RHD*01</i> (zygosity not determined)	<i>RHCE*C/C</i>	<i>RHCE*E/E</i>	<i>GYP A*01/01</i>	<i>GYP B*03/03</i>	<i>KEL*01/01</i>	<i>FY*01/01</i>	GATA mutation not present	<i>JK*01/01</i>	<i>DO*01/01</i>
<i>RHD*01N.01/01N.01</i>	<i>RHCE*C/c</i>	<i>RHCE*E/e</i>	<i>GYP A*02/02</i>	<i>GYP B*04/04</i>	<i>KEL*02/02</i>	<i>FY*02/02</i>	Homozygous for GATA mutation (<i>FY*02N.01</i>)	<i>JK*02/02</i>	<i>DO*02/02</i>
<i>RHD*01/01</i>	<i>RHCE*c/c</i>	<i>RHCE*e/e</i>	<i>GYP A*01/02</i>	<i>GYP B*03/04</i>	<i>KEL*01/02</i>	<i>FY*01/02</i>	Heterozygous for GATA mutation	<i>JK*01/02</i>	<i>DO*01/02</i>
<i>RHD*01/01N.01</i>									
Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested
Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)

Predicted phenotype									
D positive	C+ c-	E+ e-	M+ N-	S+ s-	K+ k-		Fy(a+b-)	Jk(a+b-)	Do(a+b-)
D negative	C+ c+	E+ e+	M- N+	S- s+	K- k+		Fy(a-b+)	Jk(a-b+)	Do(a-b+)
	C- c+	E- e+	M+ N+	S+ s+	K+ k+		Fy(a+b+)	Jk(a+b+)	Do(a+b+)
							Fy(a-b-)	Jk(a-b-)	Do(a-b-)
Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested	Not tested
Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)

How would you report the genotype / predicted phenotype for Patient 1 in clinical practice									
Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above	Same as in the options selected above
Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)	Other (please specify)

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Please indicate appropriate response for each test and complete the top section