



Type of Document: Form

Title: Hemolytic Disease of the Newborn (HDN) Investigation Request Form

## Hemolytic Disease of the Newborn (HDN) Investigation Request Form

C.H.C.S.J.  K.W.H.  U.H.

Patient information	
Neonate's name : _____	Mother's name : _____
SS N <sup>o</sup> /Admission N <sup>o</sup> : _____	SS N <sup>o</sup> /Admission N <sup>o</sup> : _____
Date of birth : _____ (dd/mm/yyyy)	<input type="checkbox"/> Macao ID N <sup>o</sup> : _____
Sex : <input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Non-Macao Resident
	Race : <input type="checkbox"/> Chinese <input type="checkbox"/> Caucasian <input type="checkbox"/> Macaense
	<input type="checkbox"/> Mixed <input type="checkbox"/> Asian : _____ <input type="checkbox"/> Other : _____

Clinical information	
<b>History of pregnancy :</b>	
Gestation : _____	Para : _____ Miscarriage : _____
<b>Blood transfusion history :</b>	
Neonate : <input type="checkbox"/> No <input type="checkbox"/> Yes, Date : _____ (dd/mm/yyyy)	Mother : <input type="checkbox"/> No <input type="checkbox"/> Yes, Date : _____ (dd/mm/yyyy)
<b>Clinical history :</b>	

Laboratory result	
<b>Blood Grouping</b>	<b>Allo-antibody of mother:</b>
Mother : _____	<input type="checkbox"/> No
Neonate : _____	<input type="checkbox"/> Yes, Antibody identification : _____
	Test Date : _____ (dd/mm/yyyy)
Neonate (Sample Test Date) : _____ (dd/mm/yyyy)	
Hemoglobin : _____	Direct bilirubin : _____
Total bilirubin : _____	Indirect bilirubin : _____
Send report to : _____ (dept.) Physician name : _____, Staff no. /License no. : _____, Tel: _____	
Physician signature : _____	Date : _____ (dd/mm/yyyy)
<b>Sample requirement :</b>	Date of sample collected : _____ (dd/mm/yyyy)
Neonate : 1.5 ml EDTA blood (cord blood preferred)	Time : _____ : _____ (hh:mm)
Mother : 3 ml EDTA blood	

CTS may reject the request, **IF**:

1. Not labeled properly.
2. Insufficient/ leaked sample.
3. Improper tubes sent for tests ordered.
4. Aged sample (sample stored at 2-8°C for >7 days on day of testing)

