



May 6, 2013

CLINICAL PRACTICE CHANGE: HEMATOLOGY

Screening Test for Heparin Induced Thrombocytopenia (HIT)

Effective May 6, 2013, the screening test for HIT (detection of anti PF₄ antibody in serum) will be transferred to the DSM St. Boniface Hospital Hematology Lab (204-237-2468), Winnipeg, from the CBS Platelet Immunology Lab.

There will be a change in methodology from an ELISA to a gel-based antibody detection method. The new method is slightly more sensitive.

Sample requirements: Two 5 mL yellow top serum tubes accompanied by **specific HIT requisition**.

This specific requisition is available electronically in the test entry of the DSM LIM.

*The CBS Platelet Immunology requisitions PI.100 are being revised to remove the HIT screening test. High use areas are requested to exchange/replace their current version with the new version of Platelet Immunology requisition once available.

Sample transport: If transported to testing site (DSM SBH Hematology Lab), serum must be separated and sent refrigerated.

Test availability: Performed Monday, Wednesday, Friday

Reference range: Negative

- Results will be reported as negative, indeterminate or positive
- Indeterminate and positive samples will be reflexed to the serotonin release assay when appropriate

Test limitations: Hemolysis and lipemia interfere with results.

Due to the high sensitivity and limited specificity of antibody based methods, assessment of pretest probability by using the 4T score included in the test requisition, is highly recommended.

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