

42 C.F.R. § 493.1278

Standard: Histocompatibility.

- (a) *General*. The laboratory must meet the following requirements:
- (1) An audible alarm system must be used to monitor the storage temperature of specimens (donor and beneficiary) and reagents. The laboratory must have an emergency plan for alternate storage.
- (2) All patient specimens must be easily retrievable.
- (3) Reagent typing sera inventory prepared in-house must indicate source, bleeding date and identification number, reagent specificity, and volume remaining.
- (4) If the laboratory uses immunologic reagents (for example, antibodies, antibody-coated particles, or complement) to facilitate or enhance the isolation of lymphocytes, or lymphocyte subsets, the efficacy of the methods must be monitored with appropriate quality control procedures.
- (5) Participate in at least one national or regional cell exchange program, if available, or develop an exchange system with another laboratory in order to validate interlaboratory reproducibility.
 - (b) HLA typing. The laboratory must do the following:
- (1) Use a technique(s) that is established to optimally define, as applicable, HLA Class I and II specificities.
- (2) HLA type all potential transplant beneficiaries at a level appropriate to support clinical transplant protocol and donor selection.
- (3) HLA type cells from organ donors referred to the laboratory.
- (4) Use HLA antigen terminology that conforms to the latest report of the World Health Organization (W.H.O.) Committee on Nomenclature. Potential new antigens not yet approved by this committee must have a designation that cannot be confused with W.H.O. terminology.

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