

High/Low Frequency Antigens Discussion Questions:

1. How are low frequency antigens usually detected in testing?
2. How are high frequency antigens usually detected in testing?
3. Is it more difficult to find blood for patients with antibodies to high frequency antigens or antibodies to low frequency antigens and why?
4. What does the term hemizygous mean?
5. Does anti-Xg(a) cause HDFN or TRXNs?
6. Which Wright antibody is a common warm autoantibody?
7. Which high frequency antibody causes severe HDN and hemolytic TRXNs and also activates complement?
8. Which high frequency antibody can be removed by using neutralization techniques with the soluble form found in urine?
9. What does anti-Sd(a) agglutination look like under the microscope?
10. Which high frequency antigens are found on the 4th component of complement?
11. Which antibodies are weakly reactive and quickly disappear making them hard to identify?
12. What is the reaction strength normally for an HTLA antibody?
13. How high to HTLA antibodies tend to titer?
14. Are HTLA antibodies clinically significant?