IMMUNOHEMATOLOGY & TRANSFUSION MEDICINE

PAPER - II

IMHT/D/13/15/II

Time : 3 hours Max. Marks : 100

Important instructions:

- Attempt all questions in order.
- Each question carries 10 marks.
- Read the question carefully and answer to the point neatly and legibly.
- Do not leave any blank pages between two answers.
- Indicate the question number correctly for the answer in the margin space.
- Answer all the parts of a single question together.
- Start the answer to a question on a fresh page or leave adequate space between two answers.
- Draw table/diagrams/flowcharts wherever appropriate.

Write short notes on:

a) Molecular structure of Rh gene.b) Molecular mechanisms responsible for Rh D negative phenotype.	5+5
Describe techniques for detection of HLA antibodies and discuss clinical significance of these antibodies in Transfusion Medicine.	5+5
Give an account of the criteria for selection and purchase of the following in blood bank:- a) Anti-D Antisera b) AHG reagent for cross matching	5+5
Discuss various factors to be considered for optimal transfusion management of a patient dependent on long term transfusion support.	10
a) Discuss the abnormalities encountered in expression of ABH antigens giving rise to ABO blood group discrepancies.b) Draft a protocol for resolution of ABO discrepancies at your hospital.	5+5
Discuss various clinical and laboratory factors to be considered in detection and identification of red cell antibodies in a transfused patient.	10
 a) Enumerate indications for Rhlg administration. b) What is the mechanism of action of Rhlg? c) Draft a decision flow chart for post partum administration of Rhlg at your hospital. 	2+3+5
a) Discuss ABO compatibility in relation to platelet transfusion and its clinical implications.b) What measures can be taken to prevent immune hemolytic reaction after ABO incompatible platelet transfusion?	5+5
 a) What are cold reactive autoantibodies? b) What lab tests are affected by these auto-antibodies and how to resolve such problems? c) Compare and contrast normal (harmless) cold autoantibodies and pathological (harmful) cold autoantibodies. 	2+3+5
a) HTLA antibodies b) Monoclonal antibodies	5+5
	 b) Molecular mechanisms responsible for Rh D negative phenotype. Describe techniques for detection of HLA antibodies and discuss clinical significance of these antibodies in Transfusion Medicine. Give an account of the criteria for selection and purchase of the following in blood bank: a) Anti-D Antisera b) AHG reagent for cross matching Discuss various factors to be considered for optimal transfusion management of a patient dependent on long term transfusion support. a) Discuss the abnormalities encountered in expression of ABH antigens giving rise to ABO blood group discrepancies. b) Draft a protocol for resolution of ABO discrepancies at your hospital. Discuss various clinical and laboratory factors to be considered in detection and identification of red cell antibodies in a transfused patient. a) Enumerate indications for Rhlg administration. b) What is the mechanism of action of Rhlg? c) Draft a decision flow chart for post partum administration of Rhlg at your hospital. a) Discuss ABO compatibility in relation to platelet transfusion and its clinical implications. b) What measures can be taken to prevent immune hemolytic reaction after ABO incompatible platelet transfusion? a) What are cold reactive autoantibodies? b) What lab tests are affected by these auto-antibodies and how to resolve such problems? c) Compare and contrast normal (harmless) cold autoantibodies and pathological (harmful) cold autoantibodies. a) HTLA antibodies b) Monoclonal antibodies