

Hemoglobin D/G Trait- For Physicians

As part of routine newborn screening all babies are tested for sickle cell disease and other hemoglobinopathies. Screening of all specimens is done by isoelectric focusing (IEF). Results are then confirmed by IEF and citrate agar electrophoresis

Your patient has tested positive for hemoglobin D or hemoglobin G trait. Hemoglobin D and G are two hemoglobin variants. Our testing methods are unable to distinguish between hemoglobin D, G and other variants that migrate in the same region. Hemoglobin D or G trait is not disease and is not associated with anemia or other disease medical issues.

Although hemoglobin D trait and hemoglobin G trait have no immediate clinical significance, this information is important for future reproductive decisions of the child and other family members.

Possible Newborn Screening Results:

	Hemoglobin
F	Fetal hemoglobin, present in declining amounts until 6 months after birth
A	Normal adult hemoglobin
D/G	Hemoglobin D or hemoglobin G
B	Hemoglobin Bart's

FA: Normal newborn hemoglobin pattern

FAD/G: Hemoglobin D trait or Hemoglobin G trait

FAD/GB: Hemoglobin D trait or Hemoglobin G trait along with Hemoglobin Bart's (see separate Hemoglobin Bart's information sheet)

Follow Up Recommendations:

The baby should be referred to a genetic counselor for follow up testing and genetic counseling.

If you have any further questions, please contact the New Hampshire Newborn Screening Program at (603) 271-4225.

Please give the enclosed parent fact sheet to your patient.

The parent fact sheet is also available in Spanish. Please contact us at (603) 271-4225 if you would like us to send you a copy of the fact sheet in Spanish.