Statement 2.1	We recommend the use of FLAER or high-sensitivity flow cytometry to detect the deficiency of GPI-anchored proteins in peripheral blood (leucocytes [both neutrophils and monocytes] and erythrocytes), to confirm the diagnosis of PNH.[a]
Statement 2.2	Annual follow-up flow cytometry may be considered when clinically indicated in patients with clone size <1% on initial flow cytometry. While 6-monthly follow-ups may be considered in patients with (1) clone size >1% on initial flow cytometry or (2) underlying bone marrow failure syndromes, especially in case of disease progression or for guiding treatment.[b]

FLAER: fluorescently labelled aerolysin; GPI: glycosylphosphatidylinositol; PNH: paroxysmal nocturnal haemoglobinuria

[a] Based on the International Clinical Cytometry Society guidelines to detect GPI-deficient cells in PNH and related disorders

[b] Subject to clinician's discretion on a case-to-case basis