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	DOCUMENT TITLE	C: Dispense and Returr	of Blood Products		
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	EFFECTIVE DATE:	02 Nov 2020	NEXT REVII	EW DATE:	

RELEASE DATE:

AUTHOR: G938509	PREVIOUS NUMBER: KQE: 9.10.1-2-0101.04
OWNER: _{G938509}	CHANGE NUMBER: SCPMG-CR-0635

EXPIRATION DATE:

SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products

Purpose

This process describes the dispensing of blood and blood components and the requirements to return these products. Emergency dispense is not covered in this process.

- A Blood Release Verification (BRV) Form must be reviewed at the time of dispense.
 - All units dispensed must have a BRV Form (also known as the "Transfuse" order from Health Connect)
 - Downtime BRV forms or "Nurse Transfuse" orders/forms are acceptable.
 - The MRN is entered in the Release and Dispense application in Cerner from the BRV Form.
- All products are visually inspected at the time of dispense and return, this documentation is captured in the Cerner system or on downtime forms.
- Barcode scanning of the DIN (unit) barcode and product E-code (when multiple products are associated with the same DIN) is required in the Cerner dispense/return module.
 - If manual entry and/or selection is performed in the event of non-functioning scanner or barcodes, the user must report to manager/designee for investigation.
- All products dispensed to a courier must have the courier read the information from the tag attached to the unit.
 - Trained laboratory staff will verify the information being read from the tag is concordant with the blood product label.
 - Trained laboratory staff will verify the information being read from the tag fulfill the patient's special needs and antibodies displayed on the dispense screen for the patient MRN, Name, and product selected.

The following items must be verified upon dispense:

- Recipient's two independent identifiers (MRN and Name), ABO/Rh type
- The donation identification number (DIN), the E code (e.g. E0224A0), the donor ABO group, and, if required Rh type
- o The interpretation of crossmatch tests, if performed
- Special transfusion requirements (includes antigen negative red blood cells for patients with clinically significant antibodies), if applicable
- o The expiration date, and if applicable, time of the product

AYS scan des. If you cannot something is and you need to igate

> Always perform a readback. It is acceptable to perform read-back with someone in Blood Bank.

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Dispense and Return of Blood Products, Continued

- The date and time of issue (via computer system or downtime documentation)
- o Final visual inspection of the product
- The corresponding product order accession number is required to be scanned at dispense, as this sends the patient and product information to the Health Connect Blood Product Administration Module (BPAM), which allows for electronic verification of patient and product prior to the transfusion in the In-Patient setting.
 - The only time it is acceptable to override scanning of the accession number for the corresponding product is the following:
 - Health Connect downtime and/or manual product orders submitted (SNF, Dialysis)
 - Urgent need for blood (e.g. Hemorrhage Protocol/Emergency Release) when no product orders are placed in Health Connect, but patient has valid pre-transfusion testing.
 - The emergency dispense function is not required as crossmatched and/or assigned products can be prepared via routine workflows.
 - An ATTENTION label will be affixed to the transfusion tag communicating to the transfusionist that the blood/product barcode scanning feature is unavailable and to document in the manual blood product entry flowsheet group

SCPMG Laboratory Systems RL Transfusion Service Process

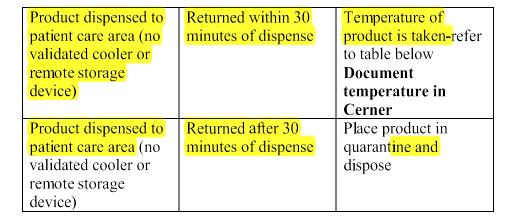
Dispense and Return of Blood Products, Continued

Policies-Return

- All products returned to the Transfusion Service and subsequently available for re-dispense must satisfy the following conditions:
 - A visual inspection must be performed and documented in the Cerner system for all products (or on downtime forms).
 - For platelets an additional visual inspection of shimmer/swirl can be performed.
 - For Red Blood Cells at least one sealed segment of integrated donor tubing has remained attached to the container.
 - Removed segments shall be reattached only after confirming that the tubing identification numbers on both the removed segments(s) and the container are identical.

	If	AND	Then
	Product dispensed in	Returned within	Products are
	Validated Cooler	validated time frame:	acceptable to be re-
4 hours		TIL . :	dispensed.
4 Hours		The container	D
		closure/seal has not	Document
		been	acceptability of
		disturbed/opened	temperature in
		OR T <mark>he validated</mark>	Cerner
	ve temperature	temperature monitoring device	
indicator	s on the units	used indicates the	
		unit(s) is/are still	
		within acceptable	
		temperature	
		temperature	
	Product dispensed in	NOT returned within	Place product in
	Validated Cooler	validated time frame:	quarantine and
			dispose.
	Product dispensed to	Returned (remote	Products are
	remote monitored	storage device has	acceptable to be re-
	storage device	maintained	dispensed.
		appropriate	
		temperature)	Document
			acceptability of
			temperature in
-			Cerner

Dispense and Return of Blood Products, Continued



NEW: ALL products (including plt, plasma, cryo) returned from floor (i.e. not stored in a remote ref or cooler) must be returned within 30 minutes AND meet temperature requirements.

- Products NOT dispensed in a validated cooler or a remote monitored storage device must be returned within 30 minutes of dispense.
 - Temperature must be measured and determined as acceptable for the specified product type. All temperatures upon return of products is documented in Cerner (Refer to Attachment C)

Product category	Acceptable Temperature Range
Red Blood Cells	1-10°C
Plasma	1-37°C
Platelets	20-24°C
Cryoprecipitate	20-24°C

- Products which do NOT qualify to be returned to the Transfusion Service and subsequently available for re-dispense are to be disposed.
 - Contact manager or designee to obtain a variance for rare products or in case of acute patient need. Refer to Deviations (Planned) from Policies. Processes or Procedures

Process

SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

Cerner System settings

Cerner will not

You will need to

in quarantine and

dispose

quarantine non-RBC

products after 30 min.

manually place these

automatically

NOTE: Placement of products in quarantine by the Cerner system does NOT align with policy statements above. It is the responsibility of the staff returning products to adhere to policy.

- Cerner will place red blood cell products in quarantine if returned >30 minutes after dispensing Red blood cell products may be released from quarantine if they meet the policies stated above.
- Cerner will place non-red blood cell products in quarantine if returned > 240 minutes after dispensing. The CLS must manually place these products in quarantine if they do meet the policies stated above.
- Products dispensed are automatically updated from a "dispense" status to a "transfused" status in the Cerner system via an automated OPS job which runs every morning (prior to 3am).
- Once products are placed in quarantine, they must be updated to disposed status with correct dispose reason.

Uncontrolled Documents

AABB Standards, current ed.

CAP Requirements, checklist, current ed.

Fung, Mark K. Ed. Technical Manual, 19th Ed. AABB,2017

Controlled Documents

Attachment A: Routine Dispense

Attachment B: Dispense with Override

Attachment C: Return Products

Visual Inspection of Blood and Blood Components

Final Disposition and Product Management in Cerner

How to Pack, Ship, Distribute and Transport Blood and Blood

Components

Use of Timestrip® Blood Temp 10 Indicators

Deviations (Planned) from Policies, Processes or Procedures

Authors

All SCPMG Transfusion Services Managers Regional Blood Bank Compliance Officer

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Dispense and Return of Blood Products, Continued

Ginny Tyler	January 17, 2008
Virginia Vengelen-Tyler, MBA, MT, ASCP(SBB), CQA(ASQ) Regional Blood Bank Compliance Officer	Date
Signature Collected Electronically	January 5, 2011
Adriana A. Bedoya, M.D. FCAP, FASCP Medical Director- San Diego –SA	Date
Signature Collected Electronically	November 7, 2007
Gary Gochman, MD, Medical Director –Tri-Central SA	Date
Signature Collected Electronically	December 12, 2009
Jeffrey D. Shiffer, MD. Medical Director –San Fernando Valley SA	Date
Signature Collected Electronically	November 12, 2007
Joseph Thompson, MD. Medical Director –Metropolitan SA	Date
Signature Collected Electronically	November 9, 2007
David Huebner-Chan, MD. Medical Director –Orange County SA	Date
Signature Collected Electronically	December 12, 2007
Dong Quach, MD. Medical Director –Inland Empire SA	Date
Signature Collected Electronically	December 12, 2007
Ramesch Doshi, MD. Medical Director- Tri-Central SA	
	December 12, 2007
Signature Collected Electronically	

SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

DOCUMENT HISTORY PAGE Effective Date: <u>January 21, 2008</u>

Change type: new, major, minor etc.	Changes Made to Document – Describe	Signature responsible person/Date	Med. Dir. Reviewed/ Date	Lab Manager reviewed/ Date	Date change Imp.
Minor	Added clarity on how and who checks documents at the time of dispense.	Ginny Tyler 05/22/08	N.A.	N.A.	
Minor	Added workflows J to describe how to assign products	Ginny Tyler 07/18/08	N.A.	N.A.	
Minor	 Added the temperature for RBCs to be 1-10C for returned RBCs. Added Infrared thermometer in flowchart. Revised Flowchart H to reflect temperature Gave criteria for return of plasma and platelets 	Ginny Tyler 12/23/10	N.A.	N.A.	
Minor V.04	Removed FlowChart D, Dispense of RhIg, renumber the other charts.	Ginny Tyler			
Major V.05	 Allowing Platelets and thawed plasma and CRYO to be returned up to 4 hours after dispense. Do not require taking temperature for plasma, Cryo or platelets. Reformatted 	Ginny Tyler 01/16/2012	Collected by 01/13/2012	N.A.	

MasterControl History of Change:			
Change type: new, major, minor etc.	Version #	Description of Change	
Minor	8	Updated to attach flowcharts and includes items for verification at dispense	

SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

MasterControl History of Change:			
Change type: new, major, minor etc.	Version #	Description of Change	
Minor	9	Updated add E code as item for verification at dispense. Clarified that "read back" must only be completed when trained KP courier is retrieving blood products for delivery, when Courier is not present, trained laboratory staff may dispense without a readback being completed per local protocol. Removed Flowchart B1-B2, added process for dispense to OR/validated cooler/pneumatic tube system to Flowcharts A1 and A2. Removed Flowchart D, not applicable as all rbc products need either a crossmatch or are dispense via the Emergency Dispense pathway. Renamed Flowchart E to B, updated process steps. Cerner icons updated for Flowcharts.	
Major	10	Updated for BPAM workflows. Removed Cerner flowcharts and added attachments with Cerner screenshots for enhanced understanding of dispense and return modules in Cerner.	
Minor	11	Return Polices/Acceptance criteria for products updated. Policy for scanning of DIN and product codes added. Attachment C updated.	

SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

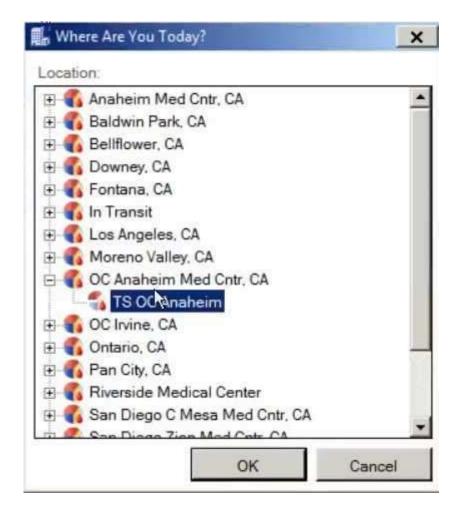
Attachment A: Routine Dispense, page 1 of 5

Launch Dispense and Assign Products



The following screen will open the first time dispensing for that day.

Select the correct location.



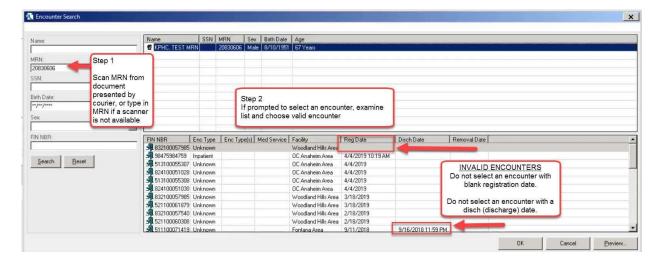
SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

Attachment A: Routine Dispense, page 2 of 5

Scan or enter MRN into field from the BRV form

- If an Encounter window opens select a valid encounter.
- If uncertain of which is the correct encounter, verify in Health Connect.



Select encounter and enter OK

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Check order comments

in ORV as well and

make sure special

requirements were

added

Dispense and Return of Blood Products, Continued

Attachment A: Routine Dispense, page 3 of 5

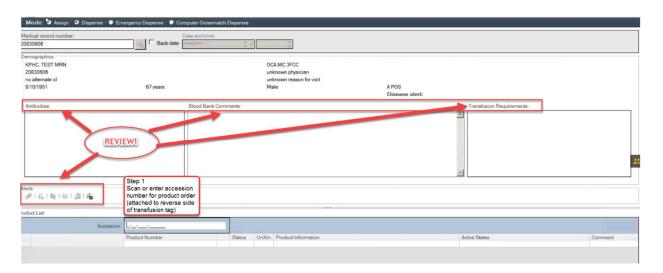
Change task to Dispense.

Review the following:

- Antibodies
- Transfusion Requirments
- Blood Bank Comments

Check alert icons:

- Autologous or Directed (Dispense first)
- Associated products-open to view units ready for dispense



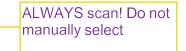
Scan product order accession number.

• This accession label should be adhered to the back of the transfusion tag by whoever crossmatched/assigned the product.

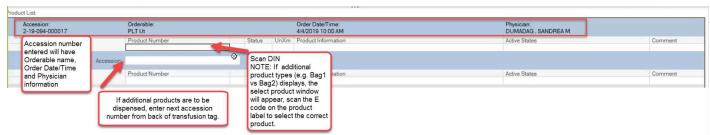
SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

Attachment A: Routine Dispense, page 4 of 5

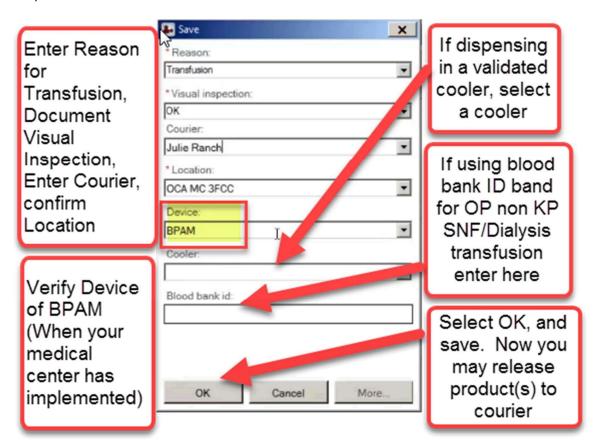


Scan DIN from the product label: If a Select product window opens, you must also scan the product code (Ecode) from the product label



Select Save icon at top of screen to continue to next dispense window in Cerner, do not release the product to the courier, as the dispense process is not yet completed.

Complete dispense window in Cerner as shown below if product is acceptable for dispense.



SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

Attachment A: Routine Dispense, page 5 of 5

Perform readback with Courier

- Courier will read the patient and product information from the tag attached to the product
- Trained laboratory staff will verify:
 - The information from the BRV form.
 - Patient name, MRN, product category (RBC, PLT, Plasma, etc)
 - The information from the product label
 - DIN, product Ecode, donor ABO group and if required the Rh type
 - Product expiration date and if applicable time
 - The patient transfusion requirements are met (irradiated, Ag negative, etc)
 - The interpretation of crossmatch tests if performed.

Do this with CAUTION and only when working alone (e.g. weekend/

If dispense occurs without a Courier (e.g. to cooler, OR, or via the pneumatic tube system) one laboratory staff member may verify the above information per local protocol.

NOTE: A dispense packing list report is automatically printed at the conclusion of the dispense process. A second report may be required to be sent with the products when dispensing to facilities outside of the medical center (MOB, Dialysis, SNF) per local protocol.

Attach dispense slip to BRV form and file

SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

Attachment B: Dispense with an Override, page 1 of 2

Blood Bank Exception window: Product accession number is not scanned on the dispense screen. If no product order from Health Connect has been placed override with the correct reason.

Place an "ATTENTION" label on the transfusion tag indicating for the transfusionist that the blood/product barcode scanning feature is unavailable and to document in the manual blood product entry flowsheet group.



Blood Bank Exception window: Wrong product assigned for order, do not override.

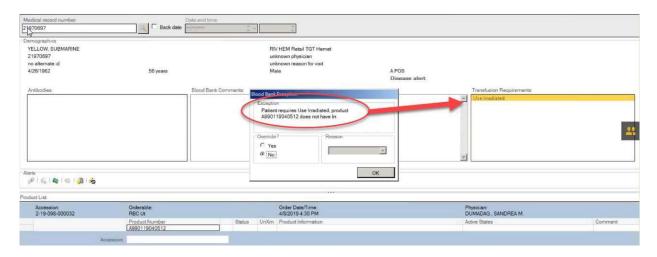


SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

Attachment B: Dispense with an Override, page 2 of 2

Blood Bank Exception window: Transfusion requirement not met.



Blood Bank Exception window: All overrides performed by a CLS will be found on the Exception Report and reviewed for acceptablity.

SCPMG Laboratory Systems RL Transfusion Service Process

Dispense and Return of Blood Products, Continued

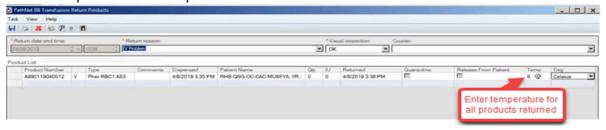
Attachment C: Return Product

Launch



Enter return date/time, reason, and Visual Inspection

Enter temperature for all products returned



Complete the Product Release/Quarantine window.

