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Submitting Samples to a Reference Laboratory - Dearborn Blood Bank

Document Type: Procedure

I. PURPOSE AND OBJECTIVE:

This document will provide Blood Bank staff with guidance for the submission of samples to an external reference laboratory.

II. INTRODUCTION:

A. In some circumstances it may be necessary to enlist a reference laboratory to perform red blood cell (RBC) molecular genotyping and extensive testing on patients or to provide assistance with locating compatible units for patients with known antibody specificities or antigen. These laboratories are staffed with highly trained technologists in the field of serologic investigation and have access to a variety of rare test RBCs and units, as well as an international network of blood suppliers and reference labs.

B. The Blood Bank primarily utilizes the Versiti Michigan and Versiti Wisconsin Immunohematology Reference Laboratories (IRL) for testing. Alternatively, the American Red Cross (ARC) Immunohematology Reference Lab or the University of Michigan Hospitals and Health System may also be called upon to complete a patient workup when appropriate.

III. SCOPE:

A. The services of the Versiti IRLs or an alternative reference laboratory may be used when a technologist, after consultation with the management or medical director, determines that a difficult antibody or transfusion-related problem requires this additional service.

B. The reference laboratory may also be used to help find compatible units for patients with

known antibody specificities in situations where it may be difficult to find blood in the Blood Bank inventory; a sample may or may not be required to be sent in this situation.

IV. SPECIMEN COLLECTION AND HANDLING:

One red clot tube (7mL) and two purple or pink EDTA whole blood (10mL total) pre-transfusion specimens are preferred for the standard blood workup. Serum separator tubes are not acceptable. The reference laboratory may have other sample requirements; call the reference laboratory before collecting or sending patient samples for additional specimen requirements. All specimens must be properly labeled with patient last name, first name, site medical record number, date collected, time collected, and signature or tech code of person obtaining specimen.

V. FORMS

A. Versiti Michigan, Immunohematology Reference Lab Request
B. Versiti Wisconsin, Immunohematology Reference Lab Request
C. American Red Cross, Immunohematology Consultation Request
D. University of Michigan Hospitals and Health System, Request for Immunohematologic Studies

VI. SUPPLIES

A. Copy of all Blood Bank testing pertinent to the case
B. Shipping container
C. Plastic biohazard bag
D. Absorbent material

VII. POLICIES:

A. Testing will be performed routine if the patient's hemoglobin is > 7.0 g/dL.
B. STAT and after hours testing will be performed only when patient's hemoglobin is <7.0 g/dL.
C. Testing outside of routine hours requires confirmation of patient's clinical need for emergency transfusion via laboratory values and/or physician assessment.

VIII. PROCEDURE:

A. Confirming Sample Requirements

1. Call the reference laboratory to inform the reference laboratory of the degree of urgency, and ask if there are any special sample requirements.
    a. If a sample is being sent to Versiti Wisconsin for molecular genotyping, no phone call to the reference laboratory is necessary.
2. Determine if there is sufficient sample available to meet the requirements.

a. If there is sufficient sample available, proceed to procedure *Submission of Sample to Reference Lab*.
Note: It is acceptable to retrieve and send a complete blood count sample (lavender top) on the patient. In addition, the Blood Bank's type and screen sample may be sent if the sample is no longer in-date, and the patient has not been transfused within the 7 day post collection.

b. If additional sample is required then determine order a miscellaneous Blood Bank test (LAB6339) in Epic and bring the shingle to the phlebotomy area to request a stat blood draw, or notify the caregiver if phlebotomy does not collect the patient. Note: This miscellaneous Blood Bank test will remain pending until the samples have been collected and sent to the reference laboratory, at which time the miscellaneous Blood Bank test may be cancelled.

B. Submission of Sample to Reference Lab

1. Complete the Request Form for the reference laboratory as completely as possible with:
    a. Diagnosis
    b. Transfusion History
    c. Pregnancy History
    d. Recent Hemoglobin
    e. Medication History
2. Attach a copy all pertinent laboratory testing results for the patient, and all applicable antigrams.
3. Make a copy of the *Request Form* for our records.
4. Package the patient sample(s) in a manner to contain leakage. Wrap test tubes in absorbent material, place test tubes in a biohazard bag. Place sealed bag in padded envelope or Styrofoam box.
5. Arrange for transport to the reference laboratory.
    a. Call the Livonia Center at 1-734-855-4660 to arrange for a specimen transport to the Versiti IRLs.
    b. Call Client Services at 1-248-577-9600 to arrange a cab for delivery to the American Red Cross IRL or The University of Michigan Hospitals and Health System if sending samples to these reference laboratories.
6. Place all paperwork in the *Sent to Reference Lab / Waiting for Preliminary Reference Lab Report* file folder on the communication bench.
7. When the reference laboratory calls or faxes the preliminary report, retrieve the lab copies of the Request form and the update the computer record. Initial and date the preliminary report to indicate that the record was updated.
    a. If a patient sample was submitted to the Versiti Wisconsin for a molecular genotype, there will be no preliminary report. The above instructions will take place upon receiving the final report only.

b. If it is unclear how to interpret a reference report (i.e. there are variations or mutations present in a molecular genotype report, or extensive testing performed in a workup with difficult methodology) consult the Supervisor, Lead Technologist or Medical Director for evaluation.

8. Submit copies of all paperwork for supervisory review.
    a. It is not required to wait for the final report if a preliminary report has been received.
    b. Supervisory review may be started before the reference laboratory report is received, but should not be completed until receiving the reference report.
9. Bill the patient for the reference work performed if available.
    a. The Versiti IRL's will send a Billing Worksheet either with the preliminary or final report.
10. When the final report is received by the Blood Bank, review the report to confirm it matches the preliminary report, and that the computer record is correct.
11. The technologist will initial and date the final report and submit the report for completion of the supervisory review.
12. After review, file the report alphabetically in the designated *Reference Lab file* in the department.

IX. NOTES:

A. If antibody identification is complete and the request is for provision of blood units only (antigen tested RBCs), then a sample may not be required by the Reference Laboratory. A phone call to the Reference Laboratory will usually suffice, and paperwork is generally not required. However, if compatible blood units are extremely rare and the antibody is sufficiently reactive to be useful in screening blood units, a sample may be requested. Such units will only be released if the Reference Laboratory has confirmed the antibody identification.

B. See the individual Request Forms for IRL hours of operation, phone numbers, and further information regarding sample requirements

X. REFERENCES:

1. AABB, *Technical Manual,* current edition.

Approval Signatures

Step Description	Approver	Date
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