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Origination N/A Document Contact Kelly Sartor

Approved Area Laboratory-Blood

Applicability

Dearborn

Effective 14 Days After

Last Revised N/A

Next Review 2 years after

approval

Approval

Therapeutic Phlebotomy - Dearborn Blood Bank

Document Type: Procedure

I. PURPOSE AND OBJECTIVE:

This document will describe the use and responsibilities for therapeutic phlebotomy procedures performed at BH-Dearborn.

II. POLICIES:

- A. All requests for therapeutic phlebotomy are referred to the Cancer Treatment Center.
- B. Therapeutic phlebotomy is performed most commonly to remove a pathogenic element from blood. There must be a physician's order on the patient's chart that includes the clinical indication, type of procedure, frequency and volume of blood to be drawn.
- C. Therapeutic Phlebotomy can only be performed by the nursing staff in the Cancer Treatment Center by appointment only.
- D. Laboratory staff will only be responsible to help re-route misdirected calls/orders. No other involvement in the procedure is permitted.
- E. Blood collected must be discarded in an appropriate biohazard container.

III. PROCEDURE:

- A. All orders/request for therapeutic phlebotomy will be re-routed to the Cancer Treatment Center at 313-593-7483.
- B. The cancer treatment staff will be responsible for clarifying the details of the order with the ordering physician and scheduling the patient.

IV. REFERENCES:

1. AABB Technical Manual, current edition.

Approval Signatures

Step Description	Approver	Date
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