


|                                                                                   |                                               |                        |                                             |
|-----------------------------------------------------------------------------------|-----------------------------------------------|------------------------|---------------------------------------------|
|  | <b>Expired Supply</b><br><br><b>OP-306-22</b> | <b>Dept:</b>           | <b>Outpatient<br/>Phlebotomy<br/>324306</b> |
|                                                                                   |                                               | <b>Effective Date:</b> | <b>February,<br/>2011</b>                   |
|                                                                                   |                                               | <b>Revised Date:</b>   | <b>February,<br/>2019</b>                   |
|                                                                                   |                                               | <b>Contact:</b>        | <b>Rinard<br/>Howard</b>                    |
| <b>Name &amp; Title: Gregory Pomper, MD Medical Director</b>                      |                                               | <b>Date:</b>           |                                             |
| <b>Signature:</b>                                                                 |                                               |                        |                                             |

**1) General Procedure Statement:**

- a. **Purpose:** To ensure all blood collection supplies are always checked, rotated and within their expiration dates.
- b. **Responsible Department/Scope:**
  1. Procedure owner/Implementer: Outpatient Phlebotomy
  2. Procedure prepared by: Rinard Howard, MHA PBT – ACSP
  3. Who performs procedure: Outpatient Phlebotomy staff

**2) Procedure:**

- All blood collection supplies should be checked for expiration dates every time an order is received into the lab. Phlebotomy technician should initial the “Expired Supply Log” as verification that it was completed.
- All blood collection supplies should be checked for expiration dates at the end of each month. Phlebotomy technician should initial the “Expired Supply Log” as verification that it was completed.
- Any expired supply found in the lab should be documented and a list given to the manager/coordinator(s) and then the supply should be discarded immediately.

**3) Remediation Triggers:**

- At the monthly audit completed by the manager/coordinator(s); if expired supply is found and the phlebotomy technician has initialed or the technician has failed to initial the “Expired Supply Log” the employee will be held accountable for not following this procedure.

| Remedial Action of Expired Supply |                           |                 |                   |                   |                  |
|-----------------------------------|---------------------------|-----------------|-------------------|-------------------|------------------|
| Occurrence                        |                           |                 | ACTION            |                   |                  |
|                                   | Documented Verbal Warning | Written Warning | Reprimand         | Suspension        | Discharge        |
| <b>Level One</b>                  |                           |                 |                   |                   |                  |
| 1st Occurrence                    | X                         |                 |                   |                   |                  |
| 2nd Occurrence                    | X                         |                 |                   |                   |                  |
| 3rd Occurrence                    |                           | X               |                   |                   |                  |
| 4th Occurrence                    |                           |                 | X                 |                   |                  |
| 5th Occurrence                    |                           |                 | (within 12 months | X                 |                  |
| 6th Occurrence                    |                           |                 | of previous)      | (within 12 months | X                |
|                                   |                           |                 |                   | of previous)      | (within 6 months |
|                                   |                           |                 |                   |                   | of previous)     |

- 4) **Related Procedures: N/A**  
Hospital Policy – Performance Standards Policy
- 5) **References: N/A**
- 6) **Attachments:**  
Expired Supply Log
- 7) **Revised/Reviewed Dates and Signatures:**

Attachment I

**Expired Supply Log**

|    | Supply Order | End of Month | Phlebotomy Technician's initials | Date:     |
|----|--------------|--------------|----------------------------------|-----------|
|    | ✓            |              | <i>RPA</i>                       | 3/24/2019 |
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Reviewed/Revised Date: \_\_\_\_\_ By: \_\_\_\_\_  
(Medical Director/Designee)

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