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| **Transfusion Service Disaster Plan** | | | | | | | | | |
| **Purpose** | This procedure provides instructions for maintaining operation of the Transfusion Service in the event of a blood product shortage or of an internal laboratory disaster requiring the Transfusion Service to relocate or evacuate.  Solutions to every possible situation cannot be addressed.  Staff should refer to [Children's of Minnesota - Organizational Policy and Procedure Manual](http://khan.childrensmn.org/Manuals/Policy/Chapters.asp?account=900) section 900 for organizational policy and procedures to address specific situations. | | | | | | | | |
| **Policy Statement** | * If the situation that currently is or could potentially impact services and existing contingency planning and resources are not adequate to manage the situation, the Incident Command Assessment Team (ICAT) will be notified to help with emergency management. * The Transfusion Service Disaster plan shall be tested on a regular basis at a minimum of annually on each Children’s site. | | | | | | | | |
| **Materials** | **Equipment** | | | **Reagents** | | | | | **Supplies** |
| * BB centrifuge with dual heads for spinning specimens and tube testing * MTS incubator * MTS Centrifuge (optional) | | | * Both reagent racks * IgG gel cards (optional) | | | | | * Downtime notebook * 1 case 60 ml syringe sets. * BB infrared thermometer * Transfusion Service Disaster supply box   + Syringe caps   + 2 boxes 10x75 tubes   + 1 box BB pipettes   + Filter set caps   + Unit Tags   + Emergency Release Tags |
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| **Procedure** |  | | | | | | | | |
|  | **Step** | Action | | | | | | | |
|  | 1 | Notify the Laboratory Manager and Transfusion Service technical specialist if need to relocate is probable and request staffing support as needed.   * Laboratory Manager and or TS technical specialist to notify the Nursing Supervisor and request that they initiate an ICAT call patient care units of situation and provide contact information. * Laboratory Manager and or TS technical specialist to notify Laboratory Director and TS Medical Director. | | | | | | | |
|  | 2 | Notify other Children’s Transfusion Service of situation and potential need for backup storage and testing services and additional supplies. | | | | | | | |
|  | 3 | Notify blood centers of situation. | | | | | | | |
|  | 4 | Assess inventory needs. As time allows:   * Prepare minimum inventory in blood bank coolers and/or blood center shipping containers following standard procedure for transport. Priority:   1. O Neg CPDA-1 RBC units   2. O Neg additive RBC units   3. O Pos additive RBC units   4. A Pos Additive RBC units   5. AB FFP   6. AB Cryo   7. All of the current platelet inventory * Return unneeded products to blood center or transfer to other site. | | | | | | | |
|  | 5 | Compile the materials listed above for transport or use job aid Tsja 18.8.1 Transfusion Service Internal Disaster Checklist. | | | | | | | |
|  | 6 | Relocation options: | | | | | | | |
| Horizontal within the lab: | | | Mpls | | Outpatient Lab | | |
| Stp | | Old Heme area | | |
| Notes: | | Use available Sunquest terminal to record functions in system according to standard procedure. | | |
| Vertical within hospital | | | Mpls | | CVOR 4th floor, Tissue tank room | | |
| STP | | OR BB refrigerator room | | |
| Notes: | | Notify LIS to determine ability to obtain access to Sunquest system or follow downtime procedures.  Use surgery BB refrigerator(s) for additional product storage. | | |
|  |  | External | | | Relocate operations to other campus or blood center. If relocating to blood center, use downtime procedures. | | | | |
|  |  | Note: | | Notify Children’s leadership if operations are move off-sight. | | |
|  | 7 | Defer testing to other Children’s campus (or blood center) as needed. | | | | | | | |
|  | 8 | Obtain additional supplies from other campus (or blood center) as needed. | | | | | | | |
|  | 9 | Return to normal operations when approved by the Laboratory Director or designee. | | | | | | | |
|  | 10 | Complete a Safety Learning Report documenting the event.  Note:   * Event to be included in transfusion committee report. * A follow-up review of the event and patient care impact will occur including staff involved and appropriate leadership representation. | | | | | | | |
| **Blood Product Shortage** | |  |  | | --- | --- | | **Step** | **Action** | | 1 | Notified by blood center that there is a shortage of blood products that currently is or could impact daily operations. | | 2 | Notify the Nursing Supervisor and request she/he initiate an ICAT call   * MPLS: 651-629-3546 * STP: 651-629-3547 | | 3 | Notify the Laboratory Manage and Transfusion Service technical specialist. | | 4 | Provide a situational update of the blood product shortage to the ICAT team. | | 5 | ICAT will determine what level of command center activation would be appropriate to help manage the blood product shortage. | | | | | | | | | |
| **Approval**  **Workflow** | Transfusion Service/Laboratory Director | | | | | | | | |
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| **Historical Record** | **Version** | | **Written/Revised by:** | | | **Effective Date:** | | **Summary of Revisions** | |
| 1 | | Judy Wenzel | | | 8/01/2011 | | Initial Version | |
|  | 2 | | S. Cassidy | | | 8/20/13 | | Add policy statement: testing disaster plan on a regular basis minimum once a year per campus. Revised supply list. | |
|  | 3 | | S. Cassidy | | | 03/17/2020 | | Added steps for blood product shortage | |