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**Key Words:** 

Applicability: All Beaumont Hospitals

## **Labeling Blood Components - Blood Bank**

Document Type: Procedure

### I. PURPOSE AND OBJECTIVE:

- A. The purpose of this document is to provide guidance related to the labeling of blood products to:
  - 1. Facilitate the use of a uniform container label for blood products.
  - 2. Enable the tracing of any blood product (including those in a pool) from source to final disposition.
  - 3. Allow for the recheck of records applying to the specific unit, including investigation of reported adverse events.

### II. POLICIES:

### A. General Labeling Requirements

- 1. Blood products must be labeled by the collection facility in conformance with ISBT or Codabar standards where applicable.
- 2. The original label from the blood supplier and any portions added by another facility must be affixed to the container and must be in clear, eye-readable type.
- 3. The ABO/Rh, donor number, product code and expiration date must be in barcode scanner readable format.
- 4. All Blood product labels received from outside manufacturer must be inspected for content, legibility, color, etc. before use. In addition, ABO stickers will be scanned into the computer system to verify that the barcode is accurate. Refer to site specific Transfusion Medicine policy, Receipt of Blood Bank Critical Reagents and Materials.

# **B.** Alterations to the Original Label due to Product Modifications

The original label provided by the collection facility shall not be removed, altered, or obscured except when the label is altered to reflect the modified blood product description and new expiration date / time.

1. All blood products that are manufactured at a Beaumont Health facility must be labeled with the facility's registration number. The registration number automatically prints on some computer-

- generated labels. Note: Pooled products are not licensed products, as of the effective date of this document.
- 2. When blood products are modified, new labels with Food and Drug Administration (FDA) approved adhesive are applied. The labeling process must also include a method to ensure the accuracy of all labels including the ABO/Rh, expiration date, product description, and product code. Refer to policy *Label Verification*.
- 3. Handwritten alterations (to reflect product modification) shall be applied with permanent, moisture-proof ink.
- 4. When labeling a blood product to reflect modifications, only the portions of the label that have changed due to the modification should be altered / relabeled.
  - a. For example: When a very fresh RBC unit is irradiated; the expiration date and blood product description have changed due to the irradiation. Only the expiration date and blood product description labels should be printed. The necessary 2" x 2" label or 4" x 2" labels should be printed and used to relabel the irradiated RBCs. Do not print a full face label because this label also includes the ABO/Rh which does not need relabeling on the unit.

#### C. Label Verification

If a component is modified and new labels are applied, the labeling process shall include a
method to ensure the accuracy of all labels including the donor identification number, ABO/Rh,
expiration date, product description, and blood product code. For ISBT units, refer to Blood Bank
CDM, Change Products and Label Verification of Codabar Units.

### D. Visual Inspection

As indicated in the Transfusion Medicine policy, <u>Dispensing Blood Products</u> all blood components must be visually inspected, and must be satisfactory before the component is dispensed from the Blood Bank. Refer also to the Job Aid titled, *American Red Cross Visual Inspection Reference Guide* located in a binder at the dispense area.

# E. Volume of Blood Product / Volume and Type of Anticoagulant / Preservative

- 1. When labeling a modified blood product, the volume of the blood product and the volume and type of anticoagulant should be documented on the new label.
- 2. The volume and type of anticoagulant that is documented on the new label should be the same volume and type of anticoagulant that was on the original label from the blood supplier.

### **III. DEFINITIONS / ACRONYMS:**

- A. **ISBT**: A standard for the identification, labeling, and information processing of blood, cellular therapy, and tissue products.
- B. **Label**: An inscription affixed to a unit of blood, blood component, tissue, derivative, or sample for identification. It can be computer generated or hand written.
- C. **Labeling**: Information that is required or selected to accompany a unit of blood, blood component, tissue, derivative, or sample, which may include content, identification, description of processes, storage

requirements, expiration date, cautionary statements, or indications for use.

D. **Codabar**: A label standard that was used prior to the implementation of the more current ISBT standards.

## IV. QUALITY CONTROL (QC):

The labeling of all blood products is verified at the time of dispense from the Blood Bank. For additional Information refer to Transfusion Medicine policy, <u>Dispensing Blood Products</u>. The labeling of all blood products that are modified at a Beaumont Health facility are verified as described in II.C. *Label Verification*.

### V. REFERENCES:

- 1. AABB, Standards for Blood Banks and Transfusion Services, current edition.
- 2. AABB, Technical Manual, current edition.

#### **Attachments**

No Attachments

### **Approval Signatures**

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### **Applicability**

Dearborn, Farmington Hills, Grosse Pointe, Royal Oak, Taylor, Trenton, Troy, Wayne

