Status **Active** PolicyStat ID **10589628**

Beaumont

Origination	11/22/2022
Last Approved	11/22/2022
Effective	11/22/2022
Last Revised	11/22/2022
Next Review	11/21/2024

Document Contact	Wendy Frizzo: Bone and Tissue Coordinator
Area	Laboratory-Blood Bank
Applicability	Farmington Hills, Royal Oak, Troy

Quarantining and Discarding Tissue

Document Type: Procedure

I. PURPOSE AND OBJECTIVE:

The purpose of this document is to provide the Blood Bank staff with specific guidelines for quarantining tissues from the available inventory until a thorough review and/or final disposition of the tissue(s) can take place. Compliance to these guidelines will promote the quality and traceability of each tissue provided by the Blood Bank.

II. DEFINITIONS:

A. **Quarantine**: To isolate nonconforming tissue to prevent their issuance or use.

B. **Non-conformance**: Failure to meet requirements. Example: sterility, illegible label, improperly measured tissues (12mm bone which actually measures 14mm), etc.

III. SPECIAL SAFETY PRECAUTIONS:

Tissues are biohazards. Any broken or compromised tissues should be handled using standard precautions.

IV. PROCEDURE:

A. Quarantining tissue

1. Remove implicated tissue from the inventory.
2. Quarantine the tissue in the Blood Bank Information system. Refer to Transfusion Medicine CDM, Blood Bank CDM - Edit Unit Status. If the tissue is deemed unacceptable as determined by the physician, the supplier must be contacted for instruction on proper return or discard of

the product.

3. Place tissue in the designated site specific quarantine area and affix a quarantine label to the tissue packaging.
    a. Quarantine Locations:
        a. Frozen tissue must go into a monitored ultra-low freezer in an area sequestered from general inventory, and labeled "Quarantined".
        b. Refrigerated tissue must go into a monitored refrigerator in an area sequestered from general inventory, and labeled "Quarantined".
        c. Room temperature tissue must go into a monitored room temperature area sequestered from general inventory, and labeled "Quarantined".
        d. Tissue stored in a liquid nitrogen Dewar must be placed in a biohazard bag and returned to the liquid nitrogen Dewar, in the quarantine metal sleeve.
4. Document quarantined tissues using the on-line Internal Variance form.

B. Discarding Tissue

A. Discarding Tissue Products
Tissue may need to be discarded for several reasons: unsatisfactory visual inspection, unacceptable temperature, expiration date, etc. Tissue must remain in quarantine area until discard is approved by a Tissue Coordinator, Tissue Technologist, or Blood Bank Supervisor. The following steps are taken to discard a tissue:

1. The product should be discarded in the Blood Bank computer system. Refer to Blood Bank CDM - Edit Unit Status.
2. When discarding tissues in the computer, a code is entered for the discard reason:
    a. AUTO: auto unit expired
    b. BTWS: broken in transport-supplier
    c. DAM: damaged by nurse
    d. EXPCR: expired with cost recovery
    e. EXPIR: expired
    f. FAIL: visual inspection failed
    g. LAB: lab accident
    h. ONU: opened, not used
    i. ONUCR: open, not used with cost recovery
    j. PATHD: pathologist determined
    k. SFAIL: visual inspection failed-supplier
    l. SHP: shipped-improper condition
    m. SRCAL: supplier recall
    n. SUPD: supplier defect
    o. TCLER: tissue-clerical error

p. TPOOR: tissue poor quality

3. Complete the tissue tracking form that is included inside packaging before discarding.
4. The product should be physically discarded in a red Biohazard bin as medical waste. This medical waste is picked up from Beaumont Health by a medical waste management company and disposed of by means of incineration (or other governmentally approved means). Refer to Policy, Management and Disposal of Infectious Waste & Sharps.

V. WARNINGS:

Market withdrawal, recall, and discovery of nonconforming tissues require immediate sequestering from available inventory.

VI. REFERENCES:

A. AABB, Standards for Blood Banks and Transfusion Services, current edition.
B. American Association of Tissue Banks, Standards, current edition

Approval Signatures

Step Description	Approver	Date
	Kristina Davis: Staff Physician	11/22/2022
	Vaishali Pansare: Chief, Pathology	11/17/2022
	Ryan Johnson: OUWB Clinical Faculty	10/28/2022
	John Pui: Chief, Pathology	10/27/2022
Policy and Forms Steering Committe (if needed)	Gail Juleff: Project Mgr Policy	10/27/2022
Policy and Forms Steering Committe (if needed)	Wendy Frizzo: Bone and Tissue Coordinator	10/27/2022
	Rebecca Thompson: Medical Technologist Lead	10/27/2022
	Karrie Torgerson: Supv, Laboratory	10/25/2022

Teresa Lovins: Supv, Laboratory	10/25/2022
Wendy Frizzo: Bone and Tissue Coordinator	10/24/2022
Wendy Frizzo: Bone and Tissue Coordinator	10/24/2022