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Applicability All Beaumont Hospitals

Reviewing the SoftBank Pending Tests Report - Blood Bank

Document Type: Procedure

I. PURPOSE AND OBJECTIVE:

This document will provide policies that will enable the Blood Bank staff to identify specimens with incomplete test results, so that appropriate actions may be taken, if applicable.

II. POLICIES:

A. Responsibility to Review the Pending Test Report

The pending test report must be reviewed by each shift, at the beginning and end of the shift. The Blood Bank staff is responsible for making sure the pending test report has been reviewed, filed or investigated, if applicable.

B. Documentation by the Technologist on the Pending Test Report

The technologist who reviews the report should document each order on the report to indicate that it has been reviewed. The technologist should also initial and date the report. For orders that require additional actions, write a note on the report to indicate the additional actions taken.

C. Missing Outpatient Samples for which a Wristband Number Appears in Soft Bank

If additional actions are required for an outpatient sample that appears on the *Pending Tests*

Report, and a wristband number appears in Soft Bank, then the sample has most likely been collected but not received in the Blood Bank. In this case, determine whether the patient is scheduled for surgery or outpatient transfusion and attempt to prevent a delay in service. For example; contact the collector, initiate a SWARM alert, document a variance report, etc.

D. SWARM Alerts

A SWARM alert (Search, Warn, Alert, Regroup, Manage) should be initiated if a sample is determined to be lost. A number of situations could warrant a SWARM alert, including a sentinel event, missing specimen, or any situation that requires immediate attention. Refer to Laboratory Quality procedure, [SWARM Alerts for Missing or Lost Specimens](#).

III. PROCEDURE:

- A. Obtain the Pending Test Report from SoftBank
 1. Access SoftBank
 2. Click 5- Management on the main menu bar.
 3. Highlight and Select I-Pending Test Report from the list.
 4. In the sorted by field type PDO to generate the report sorted by priority (P), requested date/time (D) and order number (O).
 5. Click F12 or [Enter] to display the report to screen.
 6. Select or hit Ctrl-P to request a print of the report. Do not close out the report.
 7. Highlight the desired report printer and Double-click or Hit [Enter] to complete the print. Do not close out the report window.
- B. Review each order on the report with specific attention to the Priority and Request Date/Time Columns.
 1. Investigate any STAT order that has a request time that is more than 1 hour from the current time.
 - a. Confirm physical receipt of specimen in the department and verify that testing has been initiated.
 2. Investigate any Routine order that has a request time that is more than 4 hours from the current time.
 3. Orders that do not require any action can be crossed off the pending.
- C. Further investigate the reason for any specimen (> 2hr for STATS, >4 hours Routine) with results still pending:
 1. Duplicate Orders: If the order is determined to be a duplicate order cancel the order in Beaker using [Blood Bank CDM, Cancelling Orders in Beaker](#).
 2. To Verify Status: Open the ABO/Rh or ABSCG test lines and observe the TESTED date/time. If the time is > 30 minutes of the current time, determine whether additional testing is progress (repeat testing, order confirmation, antibody workups)

etc.). Take any additional actions required to resolve the order including repeat testing or completing results.

3. CORDE: These tests must be investigated.
4. RHGPP: These tests are usually performed on the day shift.
5. TITER: These tests are performed on day shift only.
 - a. Sample should be placed in the designated rack/refrigerator for specimens pending further testing.
6. RHIGC: These tests must be investigated.
 - a. Verify that type and screen testing is completed.
 - b. Enter appropriate result.
7. FCS: Do not cancel these tests. Leave a note for day shift technologist to investigate.
8. FMHA: Do not cancel these tests until the corresponding RBC Fetal Assay or Acid Elution test is complete. Leave a note for day shift technologist to investigate if applicable.
9. Crossmatches: Verify that testing is in progress
 - a. Note on Pending Report.
 - b. If testing is not in progress, take appropriate action.
10. ABID: Evaluate the status of the test at the antibody.
 - a. Mark the Pending Report appropriately. For example, in progress or not indicated.
 - b. Cancel ABIDs that reflexed but were not indicated.
11. Unit Testing:(for example RETYP or antigen typing)
 - a. Click F-6 Unit View from the pending window to obtain more information. Determine whether additional testing is in progress. If the test is in progress, mark it on the Pending Report.
 - b. If the test is not in progress (e.g. unit was accidentally placed on the shelf without testing) then retrieve the unit from storage and perform the testing or if applicable cancel a duplicate antigen order test under Inventory/Order/Cancel.
12. Crossmatches: Verify that testing is in progress. Place a note on Pending Report.
13. Consult Orders (CXRN, CABID,etc): These tests are resulted by the Blood Bank Medical Director or Designee. If more than one (1) week has elapsed since the test was initiated, alert day shift Lead Medical Technologists or Supervisor for follow up.
14. BMISC: This test is almost always order to collect additional sample for further workup or to send for molecular studies at Versiti Wisconsin.

D. If necessary initiate a SWARM alert (Search, Warn, Alert, Regroup, Manage) for any lost or

missing specimens. Refer to Lab procedure, [SWARM Alerts for Missing or Lost Specimens](#).

- E. Verify the status of any Epic Order (Shingles) in the Triage area
 - 1. Any inpatient sample pending collection >4 hours should be brought to attention of the Phlebotomy team.
 - 2. Any outpatient sample confirmed received in the general laboratory but not received in the blood bank within 12 hours should be brought to the attention of the Processing team leaders.
- F. File the completed report in the department. Make sure to initial the report and include date and time.
- G. The pending log will be retained for a minimum 7 days.

IV. NOTES:

The Blood Bank utilizes both the Epic Beaker and Soft Lab information systems to manage patient testing. In addition to reviewing the SoftBank Pending Logs the blood bank staff are also responsible for reviewing Epic Beaker Outstanding List. Refer to Transfusion Medicine Policy, Reviewing Epic Beaker Outstanding List - Blood Bank for further details.

V. REFERENCES:

SoftBank Transfusion Management System SuperUser Training Manual Release 25.5.3 - 25.5.4, 06/2019.

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