

# Beaumont

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Applicability All Beaumont Hospitals

## Blood Product - Quarantine or Discard

Document Type: Procedure

### I. PURPOSE AND OBJECTIVE:

This document will provide policies applicable to the quarantine or discard of blood products.

- A. This document applies to all blood products stored and distributed from the Blood Banks at Beaumont Health.

### II. DEFINITIONS/ACRONYMS:

- A. **Discard:** The final status in which a product is placed upon expiration, or when it is determined that the product does not meet the criteria for acceptability, or is unsafe for transfusion.
- B. **Quarantine:** To isolate nonconforming blood products to prevent their distribution or use. The temporary status in which a unit is placed when there is any uncertainty as to whether a blood product meets the criteria for acceptability or when there is any concern about the product's safety. Placement into this status will prevent the inadvertent use of the product until the supervisor, and /or Medical Director or designee can determine whether to discard the unit or place it into inventory.
- C. **CDM:** Blood Bank Computer Documentation Manual
- D. **Designee:** Any Blood Bank technical director, or transfusion medicine fellow.

### III. POLICIES:

#### A. Placement into Quarantine

1. If the technologist has any question as to whether a blood product meets the criteria for acceptability, the product should be placed in quarantine. The following steps are

taken to place a product in quarantine:

- a. An orange quarantine sticker is placed on the blood product.
  - b. The status of the product is changed to quarantine in the Blood Bank computer system. Refer to [Blood Bank CDM - Edit Unit Status](#).
  - c. Note that if the condition "COND" field is documented as "NOT OK" the product will automatically be placed in a quarantine status.
  - d. The product is physically placed in the designated quarantine area for the product type.
    - i. Troy Only: The Blood Product Quarantine / Discard Log should be completed.
2. Blood products that have been placed in quarantine status should be stored at the products' routine storage temperature and separated from the available inventory. For example
- a. Quarantined platelets are stored on the quarantine shelf of the platelet rotator.
  - b. Quarantined RBCs and thawed plasma are stored on the quarantine shelf of the refrigerator.
3. If a blood product is placed in quarantine, and the product expires prior to the next business day (for example a holiday or over a weekend), then it may be necessary to contact the Blood Bank Medical Director, designee, or the supervisor/manager to determine whether to discard the products or place them into available inventory.
4. An internal variance report or QSR (Quality Safety Report) must be submitted. The variance report will prompt a review by the supervisor, and/or the Blood Bank Medical Director or designee to determine whether to discard the product or place it into available inventory.
5. If after review the product is deemed acceptable to return to general inventory, the orange quarantine sticker is removed and the status of the product is changed to available in the Blood Bank Computer system as described in the [Blood Bank CDM - Edit Unit Status](#).

#### **B. Discarding Blood Products**

Blood may need to be discarded for several reasons: unsatisfactory visual inspection, unacceptable temperature, expiration date, etc. The following steps are taken to discard a blood product:

1. The product should be discarded in the Blood Bank computer system. Refer to [Blood Bank CDM - Edit Unit Status](#).
2. Discard Codes  
When discarding blood products in the computer, a code is entered for the discard reason. See *Blood Product Discard Codes* attachment for a list of codes and when they should be used.
  - a. The most specific discard code should be used to indicate the reason the product was discarded. For example:

- i. If cryoprecipitate or plasma is thawed for a patient but is not transfused to this or any other patient, the correct discard code is **THW** (thawed not used). Do not use the code **EXP** (expired).
    - ii. If a syringe or aliquot is prepared for a patient but is not transfused to this or any other patient, the correct discard code is **SPL** (split not used). Do not use the code **EXP** (expired).
    - iii. Troy Only: The Blood Product Quarantine / Discard Log should be completed.
  3. Plasma/Cryoprecipitate products that have been thawed and allocated to a particular patient but not used should have the appropriate thaw instruction added to the unit. See Policy D, *Cost Recovery*.  
The THAW billing instruction should be added to the unit while the unit is still selected to the patient prior to finalizing the unit status as discarded in the Blood Bank computer. Refer to [Blood Bank CDM - Adding Billing Instruction](#).
  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](#)
- C. Submitting an Internal Blood Bank Variance Report or Quality Safety Report (QSR)**
1. QSR reports should be submitted for events that happen outside of the Blood Bank, such as products that have been returned out of temperature or beyond the acceptable time for returning them to inventory.
  2. Reporting is not necessary for products that have outdated.
  3. The variance report will prompt a review by the supervisor, and/or the Blood Bank Medical Director or designee.

**D. Cost Recovery**

1. Plasma/Cryoprecipitate products that have been thawed and allocated to a particular patient but not used should have the appropriate thaw instruction added to the unit.
  - a. The **THAW** billing instruction should be added to the unit while the unit is still selected to the patient prior to finalizing the unit status as discarded in the Blood Bank computer. Refer to [Blood Bank CDM, Adding Billing Instruction](#).
2. Credit requests will be submitted to the blood supplier, when applicable by the Blood Bank Supervisor/Manager or Lead Medical Technologists.

## IV. SPECIAL NOTES:

- A. For each blood product that is quarantined or discarded, the technologist must consider whether the blood supplier needs to be notified. This is done to help maintain the safety of the blood supply; for example, so that any additional blood products from the same donation may

be assessed, so the supplier can investigate its processes, etc. If notification of the supplier is appropriate, the notification should occur as soon as possible.

## V. REFERENCES:

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

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## Attachments

[Blood Product and Tissue Quarantine Discard Log -Troy.pdf](#)

[Blood Product Discard Codes.pdf](#)

## Approval Signatures

| Step Description                                | Approver                                    | Date      |
|---|---|-----------|
| Policy and Forms Steering Committee (if needed) | Kristina Davis: Staff Physician             | 2/21/2024 |
|   | Ann Marie Blenc: System Med Dir, Hematopath | 2/16/2024 |
|   | Vaishali Pansare: Chief, Pathology          | 2/6/2024  |
|   | Ryan Johnson: OUWB Clinical Faculty         | 1/30/2024 |
|   | Muhammad Arshad: Chief, Pathology           | 1/30/2024 |
|   | John Pui: Chief, Pathology                  | 1/26/2024 |
|   | Jeremy Powers: Chief, Pathology             | 1/26/2024 |
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|   | Katherine Persinger: Mgr, Laboratory        | 1/26/2024 |
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|   | Hilary Morey: Medical Technologist Lead     | 1/26/2024 |

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## Applicability

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