SCOPE

All laboratory personnel.

PURPOSE

To provide instruction for processing requests for blood and blood components.

POLICY

1. This policy applies to all requests for blood, components, pretransfusion testing, or any other Blood Bank procedures that may be performed as a prelude to transfusion.

2. This policy has been designed to conform to the AABB Standard that relates to requests for blood components and records that are submitted with blood samples for pretransfusion testing as stated below:

a. Requests for blood or components and records accompanying blood samples from the recipient must contain sufficient information for positive identification of the recipient, including the first and last names and identification number of the patient.

b. Incomplete, inaccurate or illegible requests shall not be accepted.

3. A request for pretransfusion testing must be submitted to the laboratory when a specimen to be used for pretransfusion testing is delivered. Generally, this will be a computer generated request form that will include labels for specimen identification.

a. During downtime for the Hospital Information System (HIS) a Laboratory Downtime Requisition must be submitted.

b. Telephone requests for pretransfusion testing must be written on a BRMCP Transfusion Service Verbal Order form.

4. Request forms must include the first and last names of the patient and the

medical record number.

5. For medical-legal reasons, the name of the responsible physician should also appear on the request form.

6. The request form must be dated.

7. The type of pretransfusion testing required (i.e., Type and Rh or Type and Screen) must be specified.

8. If blood or blood components for transfusion are requested, the amount of blood or component must be specified.

9. The date and time of anticipated transfusion, if known, should be included.

10. Personnel receiving telephone requests should note the caller's name and the time the request is received, in addition to the patient's name and type of testing required.

RESPONSIBILITIES

DEFINITIONS

There are no definitions for this policy.

PROCEDURES

1. Physicians or nursing service staff will enter a request for blood product(s) in the HIS. This request will print on a printer in the blood bank and cross to the LIS to alert the phlebotomy staff. The blood bank technologist will evaluate the request and order any additional testing necessary to provide the product. If the patient has not had a type and screen performed in the previous 3 days, a type and screen must be ordered for red cell components. A second ABORH may also need to be ordered.

2. A date/time needed, specific blood product, and quantity of products must be specified for all other (non-RBC) components.

3. Nursing service staff should only request a Type and Screen or Type and Rh if those are the only procedures ordered by the physician.

4. Phlebotomy staff should bring all blood bank orders and samples directly to the blood bank tech.

REFERENCES

Menitove, JE, ed. Standards for blood banks and transfusion services. 25th ed. Bethesda: American Association of Blood Banks, 2008.

Vengelen-Tyler, V, ed. Technical Manual. 14th ed. Bethesda: American Association of Blood Banks, 2002.

RELATED INTERNAL DOCUMENTS

Document Identifier Document Name

There are no related internal documents associated with this policy.

ATTACHMENTS

Document Identifier Document Name

REVISION HISTORY

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Version**  **#** | **Effective Date** | **Description of Change** | **Revised By** | **Removed Date** |
| 1 | 9/1/2012 | Format update | Judy Barnes |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

APPROVALS

|  |  |  |  |
| --- | --- | --- | --- |
| **Name** | **Signature** | **Authority** | **Date** |
| Judy Barnes |  | Author | 6/12/2012 |
|  |  | Reviewer |  |
| Becky Martin |  | Leadership |  |
| Tom Dickey, MD |  | CLIA Director |  |