

# STANTON TERRITORIAL HEALTH AUTHORITY

## Yellowknife, Northwest Territories

TITLE: Intra-hospital Transport of Blood,	Revision Date:	Issue Date:
Blood Components and Derivatives	30-September-17	30-September-15
Document Number: BLB60800	Status: Approved	
Distribution: Blood Bank Manual & Nursing	<b>Page:</b> 1 of 4	
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Approved by:	Signed by:	
Sarah Asmussen, Manager of Diagnostic	h. l. ku	TO
Services	- Josephie	NOCK /

#### **PURPOSE:**

This policy will provide staff guidelines in transportation of blood, blood components, and plasma derivatives within the hospital. Intra-hospital transportation shall be described as all situations where blood products are removed from designated storage equipment; located either in the Transfusion Services Blood Bank or the Operating Room. For situations where blood will be shipped to any location outside of this hospital policy **BLB60900: Inter-Facility Shipping of Blood, Blood Components and Derivatives** shall be used.

### **POLICY:**

Product storage requirements are set by laboratory policy **BLB60200**: **Storage of Blood**, **Blood Components and Derivatives**.

Traceability of all products must be maintained. A requisition is required for all product requests that includes patient identification, ordering practitioner identification, required tests, product requested, and expected time of transfusion/infusion. Traceability also requires use of the Transfusion Record that is added to the patients chart. See **BLB60300: Ordering Blood, Blood Components and Derivatives** for additional details.

Product labeling with unequivocal patient identification must be completed prior to issue.

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IntraHospitalTransportBloodCompDerivPOL.doc					

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On the product tag this includes patient identifiers, compatibility requirements, Blood Bank ID (S) Number, and attached Transfusion Record. Prior to issue these parameters are reviewed to ensure product is fit for transfusion.

Only products visually inspected and deemed compatible by medical laboratory technologists or Hematopathologist can be issued. See BLB60500: Visual Inspection of Blood, Blood Components and Derivatives for more specific details. In an emergent situation the ordering practitioner may request uncrossmatched blood products. See BLB50100: Emergency Issue of Blood, Blood Components and Derivatives.

Only qualified person(s) are allowed to issue, transport or infuse blood products. At STHA these person(s) are: MLTs, nurses, and physicians.

Acceptable transportation timelines are strict so the removal of blood products from storage should be held until patient preparation (consent, pre-medication, etc) is complete. All transfusions must be completed within 4 hours of issue. If a delay of infusion is expected the product must be returned to the lab immediately. Any blood product out of controlled temperatures for 30 minutes or greater must be transfused or returned to the laboratory for disposal by laboratory personnel. Discarding of the product will follow BLB61100: Documenting the Final Status of Returned or Discarded Blood, Blood Components and Derivatives.

Products manipulated such as spiking, warming, pooling, etc will not be returned to inventory. If manipulated products are not transfused they must be returned to the laboratory and the manipulation must be clearly described on the unit tag. The product will be received back into the laboratory information system and discarded as Unused –

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patient related.

After transfusion initiation, cessation, or completion the blood, plasma, or platelet bags, empty or not, must be returned to the laboratory. Fill out the back of the crossmatch tag and return to the lab sealed in a biohazard bag.

Training requirements will be under the scope of the STH Transfusion Committee and performed by the appropriate laboratory or staff education personnel.

#### **SPECIAL SAFETY PRECAUTIONS:**

- Handle all human blood and blood products using "Routine Practices"
- Please refer to the Northwest Territories Infection Prevention and Control Manual,
  March 2012
- Prior to testing or infusion all patients are to be identified as per I-0500 Use of Two Patient Identifiers.

#### **RELATED DOCUMENTS:**

- BLB50100: Emergency Issue of Blood, Blood Components and Derivatives. Stanton Territorial Hospital. 2014.
- BLB60200: Storage of Blood, Blood Components and Derivatives. Stanton Territorial Hospital. 2014.
- BLB60300: Ordering Blood, Blood Components and Derivatives. Stanton Territorial Hospital. 2014
- BLB60500: Visual Inspection of Blood, Blood Components and Derivatives. Stanton Territorial Hospital. 2014.

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- BLB60900: Inter-Facility Shipping of Blood, Blood Components and Derivatives. Stanton Territorial Hospital. 2014
- BLB61100: Documenting the Final Status of Returned or Discarded Blood, Blood Components and Derivatives. Stanton Territorial Hospital. 2014.

## **REFERENCES:**

- CAN/CSA Z902.10 Section 9.5.3 Blood and Blood Components. Canadian Standards Association. February 2010.
- Standards for Hospital Transfusion Services, Version 3. Canadian Society of Transfusion Medicine. February 2011.

### **REVISION HISTORY:**

REVISION	DATE	Description of Change	REQUESTED BY
1.0	30Sep15	Initial Release	M. Arbuckle

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