

TRAINING UPDATE

Lab Location: SGAH and WAH **Date Implemented:** 9.3.13
Department: Blood Bank **Due Date:** 9.21.13 (firm
deadline due to
Pilgrim transition)

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:
Issuing Blood Components— Note both the SGAH and WAH procedures are attached and they are different.
Description of change(s):
<ol style="list-style-type: none">1. When SGAH begins using the window to issue, SGAH (SGAH ONLY) will no longer read the name as part of the readback process. The rest of the readback process will remain the same. We will have to hold the blood product close to the window and point at what the receiver is expected to read back. We can always alter the process in the future if we identify other issues.2. Billing for sickle.....if we issue a unit that has not been billed (this will generally only happen with neonatal units), we must bill sickle testing during the issue process.<ol style="list-style-type: none">a. Use "SCS" for units tested in-houseb. Use "RHGBS" for units tested at ARCc. Only bill the first aliquot when billing neonatal aliquots3. DO NOT bill for tubing at any time.4. Updated photos in the appendices to ISBT-128-labeled units. Also removed name from SGAH pictures.5. Removed references to issuing RhIG at SGAH only.

Non Technical SOP

Title	Issuing Blood Components	
Prepared by	Maria Hall	Date: 7/20/2009
Owner	Stephanie Codina	Date: 10/1/2010

Laboratory Approval		
Print Name and Title	Signature	Date
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

Review:		
Print Name	Signature	Date

SGAH

Form revised 3/31/00

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1. PURPOSE

To describe the process for issuing blood and blood products.

2. SCOPE

All allocated and crossmatched blood products will be issued and dispensed per this procedure. For the emergency release procedure, refer to procedure, "Emergency Release of Blood Products."

3. RESPONSIBILITY

Both the Blood Bank personnel who issue the blood component and the clinical representative who receives the product are responsible for identifying the products intended for a patient. Records must be maintained of inspection of the unit for color and appearance, verification of record review, the technologist issuing the component and the person receiving the unit.

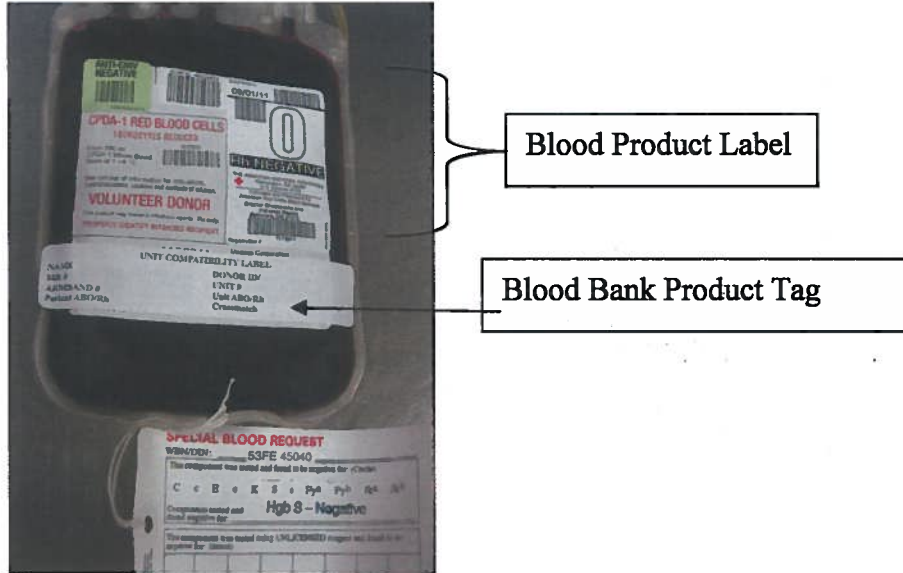
All blood bank staff members are required to demonstrate competency for verification and documentation of component issue in accordance with the policy and procedure.

4. DEFINITIONS

A. Blood Product Label - The label on the actual blood product. This label is attached when the blood product arrives from the supplier and remains attached to the blood product through final disposition.

B. Blood Bank Product Tag - The white label that is printed by the blood bank and matched to a blood product when the blood product is allocated or crossmatched. The product tag prints as part of the pink Blood Bank Product Tag and Administration Record form.

- C. Blood Bank Administration Record - The pink form that prints when a blood product is allocated or crossmatched. The title on the form is the Blood Bank Product Tag and Administration Record. The product tag is removed and applied to the blood product.



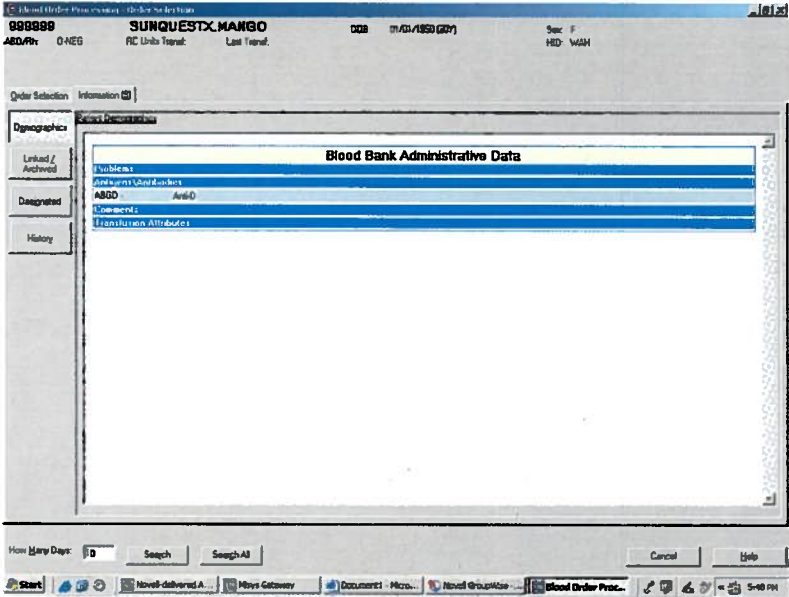
5. PROCEDURE

Note: The individual(s) performing this process should NOT be interrupted. If interruptions occur, the checking process must be restarted and repeated.

Issuing via BOP (Preferred Method)

Step	Action
1	Blood products for transfusion may be picked up by a trained RN, LPN, unit secretary, unit tech, or physician. Hospital volunteers are not allowed to handle blood products.
2	The person requesting the blood product(s) must present a completed "Transfusion Orders" or "Request for Transfusion" form. At a minimum, the form must include: <ul style="list-style-type: none"> A. Patient's full name (first and last) B. Patient's medical record number C. Blood bank armband number D. Component type requested E. Verification that: <ul style="list-style-type: none"> a. The hospital armband was verified b. IV access was verified c. Baseline vital signs were taken F. Special transfusion attributes (CMV-negative, irradiated, etc.) G. Signature of requestor H. Date and time of request I. Nursing unit

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Step	Action
3	Review the form to ensure all information is complete.
4	Access Sunquest function “Blood Order Processing.”
5	<p>At the “value” prompt, scan the patient’s medical record number from the “Transfusion Orders” or “Request for Transfusion” form then click the “search: button.</p> <p>Note: The medical record number may be typed in only when there is no barcode to scan or when the barcode is damaged and will not read.</p>
6	If more than one patient exists with the same medical record number, choose the correct patient from the pop-up menu then click the “select” button.
7	<p>A “Blood Bank Administrative Data” screen will appear. Verify that the patient’s full name and medical record number match the full name and medical record number on the “Transfusion Orders” or “Request for Transfusion” form exactly.</p> <p>Review the screen for pertinent data such as:</p> <ul style="list-style-type: none"> A. Blood type B. Current or clinically significant antibodies C. Special transfusion attributes (CMV-negative, irradiated, etc.) 

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Step	Action																																							
8	<p>Review the “Transfusion Orders” or “Request for Transfusion” form. Compare special attributes marked on the form to those in the LIS.</p> <ul style="list-style-type: none"> A. If the special attributes are listed in the LIS and not on the form, honor the attributes listed in the LIS. B. If the special attributes are marked on the form and not in the computer, <ul style="list-style-type: none"> a. Contact the nursing unit to verify the order. b. Document the attribute and the physician/LIP who requested the attribute in the LIS per procedure, “Entering Special Attributes into the LIS.” c. Order CMV testing on the patient, if indicated. 																																							
9	Click on the “Search All” button.																																							
10	<p>Click on the order selection folder and verify that the patient has at least 2 ABO/Rh specimens resulted. Note: This requirement can be waived when the patient’s situation is unstable and universal donor products are being issued.</p> <ul style="list-style-type: none"> A. These results can be found in the ABO/Rh column. B. Each ABO/Rh determination will be listed in its own row. <div data-bbox="574 978 1279 1514" data-label="Image"> <table border="1"> <thead> <tr> <th>Abn #</th> <th>Abn Ref #</th> <th>Date</th> <th>Mottle</th> <th>Diluted</th> <th>Result</th> <th>Direct</th> <th>LD</th> <th>IS</th> <th>AI</th> <th>ABO/Rh</th> <th>Abn #</th> <th>Em</th> </tr> </thead> <tbody> <tr> <td>M1</td> <td>27777</td> <td>TS</td> <td></td> <td>071010 1020</td> <td>071010 1740</td> <td>PC</td> <td>HL</td> <td>1</td> <td>1</td> <td>O-HEB</td> <td>HEB</td> <td>-3</td> </tr> <tr> <td>M1</td> <td>28888</td> <td>TS</td> <td></td> <td>020710 1420</td> <td>020710 1440</td> <td>PC</td> <td>HL</td> <td>2</td> <td>2</td> <td>O-HEB</td> <td>POS</td> <td>0</td> </tr> </tbody> </table> </div> <p>In some cases, patient’s with blood bank history before the LIS upgrade may not show in this field.</p> <ul style="list-style-type: none"> A. Access “Blood Bank Administrative Data Inquiry” and click on the ABO/Rh tab to see all ABO/Rh determinations to verify. Or B. Click on the “Information” tab, click the “History” box, then click on “Purged Specimen” to verify. 	Abn #	Abn Ref #	Date	Mottle	Diluted	Result	Direct	LD	IS	AI	ABO/Rh	Abn #	Em	M1	27777	TS		071010 1020	071010 1740	PC	HL	1	1	O-HEB	HEB	-3	M1	28888	TS		020710 1420	020710 1440	PC	HL	2	2	O-HEB	POS	0
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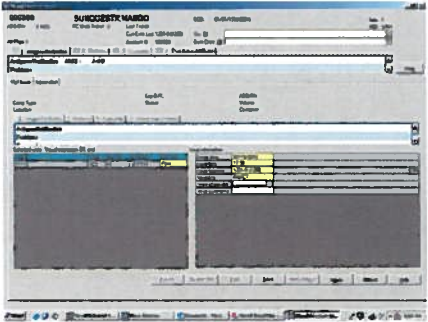
Step	Action
11	<p>Select the accession on which the blood product is allocated.</p> <ul style="list-style-type: none"> A. For red cells, this is generally the most current T&S specimen. B. For plasma, platelets, and cryoprecipitate, this is the most current transfuse order. <p>When the specimen result entry appears, verify that all testing has been completed (rbc transfusion only).</p> <ul style="list-style-type: none"> A. If the patient has a positive antibody screen, verify that the antibody identification has been entered. B. Verify that the appropriate crossmatch procedure (IS or AHG + IS) has been performed per procedure, "Crossmatch." C. Review the patient's diagnosis. If the patient has a diagnosis of sickle cell disease, he/she must also receive sickle-negative red cells. <p>Click the "save" button.</p> <ul style="list-style-type: none"> A. If QA failures were generated during testing, they will reappear. Verify the reason for the QA failure and override if applicable. B. Notify a supervisor if questions arise.
12	<p>A pop-up box will appear: "Continue to Blood Product Issue? <u>I</u>ssue, <u>E</u>mergency, <u>N</u>o, <u>H</u>elp" Click on the "Issue" option.</p>
13	<p>The computer will branch to "Blood Product Issue." Note: If the patient has linked data, a prompt "View Linked Data" will appear.</p> <ul style="list-style-type: none"> A. Click the "Yes" button. B. View the linked data. C. Click the "Unit Issue" tab to return to the issue screen.
14	<p>Retrieve the requested blood product from the appropriate blood product storage container.</p> <ul style="list-style-type: none"> A. Ensure that the blood product you are retrieving matches the blood product that was requested. Clarify information with nursing staff if necessary. B. It may be necessary to bring the request form with you to ensure retrieval of the correct blood product for the correct patient. C. Always select autologous units first, directed donor units second, and homologous units last. D. Choose units with shorter expiration dates first.
15	<p>Review the "Blood Bank Product Tag" and "Administration Record" form to ensure the component type and donor identification number (unit number) listed on the form match those on the blood product. Do not issue the blood product if discrepancies exist.</p>

Form revised 3/31/00

Step	Action																		
16	Remove the “Blood Product Tag” label from the pink “Blood Bank Administration Record” and adhere it to the front of the blood product. DO NOT cover any required information on the blood product base label. When possible, do not adhere the label directly to the blood product bag.																		
17	<p>In the “Unit Number” prompt, scan the unit number from the blood product label. The unit number will only be typed in when the barcode is unreadable.</p> <div data-bbox="586 579 1289 1108" data-label="Image"> <table border="1" data-bbox="586 758 1289 1108"> <thead> <tr> <th>Select All</th> <th>Unit #</th> <th>Status</th> <th>ABO/Rh</th> <th>Comp</th> <th>Acc No</th> <th>Amount</th> <th>Use Exp</th> <th>Exp D/T</th> </tr> </thead> <tbody> <tr> <td><input type="checkbox"/></td> <td>1-1 2222</td> <td>AL</td> <td>O NEG</td> <td>RUC</td> <td>RI</td> <td>27777</td> <td></td> <td>08/15/2012</td> </tr> </tbody> </table> </div> <p>Note:</p> <ol style="list-style-type: none"> 1. Blood products for more than one patient will never be issued to the same pickup person at the same time. 2. Under normal circumstances, only 1 unit of a blood product will be issued at a time. Two units may be issued for a single patient at one time if any of the following apply: <ol style="list-style-type: none"> 1. The units will both be transfused at the same time due to the patient’s medical condition and the patient has 2 IV access sites; one for each unit to be issued. 2. The patient is being transfused during renal dialysis. Two units of red blood cells may be issued to renal dialysis at one time. 3. The units are being issued in a blood product transport cooler. Refer to procedure, “Issuing Blood Products in a 930 Medical Transport Cooler.” 4. Two units of plasma may be issued at one time if they will be transfused within the 4-hour timeframe. 3. Multiple products may be issued for one patient if the patient is undergoing an apheresis or exchange procedure. Refer to procedure, “Issuing Blood Products in a 930 Medical Transport Cooler.” 	Select All	Unit #	Status	ABO/Rh	Comp	Acc No	Amount	Use Exp	Exp D/T	<input type="checkbox"/>	1-1 2222	AL	O NEG	RUC	RI	27777		08/15/2012
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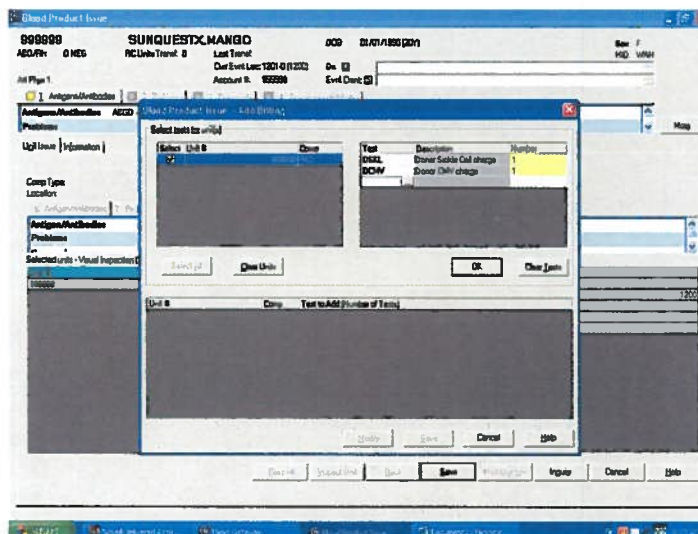
Form revised 3/13/00

Step	Action
18	Select the correct component type from the dropdown list. A. The component type will autofill if only one blood product with that unit number is in inventory. B. Click on the “continue” button.
19	Check each blood product label for accuracy and completeness. A. Verify that the product type matches in the LIS and on the blood product label. B. Verify that the expiration date matches in the LIS and on the blood product label. Pay close attention to the labels and LIS entry of blood products that were thawed, aliquoted, or irradiated by the blood bank.
20	Verify that the unit meets all patient transfusion requirements. <div data-bbox="430 829 1442 1354" style="text-align: center;"> <p>The screenshot shows a LIS interface for patient SUNQUESTX, BROCCOLI. Patient ABO/Rh is B. The component being viewed is RBCs, with ABO/Rh O NEG. A red box labeled 'Compare' has arrows pointing to these two fields to indicate a comparison of the patient's blood type with the component's blood type.</p> </div>
21	Perform a visual inspection of the blood product. Appearances that would suggest the blood product should be quarantined include: <ul style="list-style-type: none"> A. Segments that appear lighter or darker in color than the primary bag contents B. Hemolysis C. Purple color to red cells D. Clots E. White particulate matter in the primary container F. Supernatant fluid that is discolored from normal appearance G. Gross lipemia H. Foreign objects in the primary container or ports I. Fluorescent green-colored plasma caused by bacterial contamination (pale green-colored plasma as a result of biliverdin or birth-control pills is acceptable) J. Dark green-brown-colored plasma due to liver or pancreatic disease

Step	Action
22	<p>At the “Vis Insp” prompt, select one of the following:</p> <ul style="list-style-type: none"> A. Click “Pass All” if all units being issued pass the visual inspection. B. Click “Inspect Unit” if any of the units fail visual inspection. <ul style="list-style-type: none"> a. Quarantine and DO NOT ISSUE any blood product that does not pass the visual inspection. b. Notify a supervisor and return the blood product to the blood supplier. <p>Click “Continue” to access the date and time prompts.</p> 
23	<p>At the “date” and “time” prompts, press the “tab” key to default the current date and time. Type in a date in time if the issue time does not match the current time (as after a computer downtime). Review the entry to ensure the correct issue date and time are documented.</p>
24	<p>The “issue location” will default to the location at which the patient is registered.</p>
25	<p>At the “issued to” prompt, type the identity of the person picking up the blood product using one of the following and press the “tab” key:</p> <ul style="list-style-type: none"> A. First initial and last name (such as JDoe) B. First and last initials and title (such as JDRN)
26	<p>At the “issue comments” prompt, type:</p> <ul style="list-style-type: none"> A. “ICE” if the blood products were issued in a blood product transport cooler. B. “IOR” if the blood products were issued to OR.
27	<p>Perform the readback process per appendix A.</p>
28	<p>Press the “save” button.</p>

Form revised 3/31/00

Step	Action
29	A billing screen will appear.
30	<p>Bill unit charges if indicated.</p> <p>A. If no charges are to be billed, click on the “cancel” button. Note: Failure to click the cancel button may void the issue process in the computer.</p> <p>B. If charges are to be billed,</p> <ol style="list-style-type: none"> a. Select the unit(s) that the charges will be added to by clicking the box next to the unit number. b. The right column of the billing screen will activate. c. In the “test” column, type in the billing code. <ol style="list-style-type: none"> i. Type “;DCMV” to charge for a CMV-seronegative blood product if the patient requires CMV-seronegative blood products. For neonatal aliquots, only charge the first aliquot. ii. Charge for sickle negative units for neonates on the first aliquot only. <ol style="list-style-type: none"> 1. Type “;SCS” for sickle testing performed in house. 2. Type “;RHGBS” for sickle testing performed at ARC. iii. Type “;IRRC” to charge for irradiating a red blood cell products for neonates. iv. Type “;IRRP” to charge for irradiating a platelet products for neonates and only if the product type has not been changed to an irradiated unit (as in HLA-matched platelets). d. In the “number” column, type the number of those charges to be billed. e. Click the “OK” button. f. Click the “save” button.



Form revised 3/3/00

Step	Action
31	Instruct the pickup person must record his/her initials, date and time in the appropriate spaces on the component tag.
32	Document the following information on the pickup form. This information will be used for data entry when the original issue information is not captured in the LIS. <ul style="list-style-type: none"> A. Unit number of product issued B. Date and time of issue C. Person to whom blood product was issued (initials and title or first initial and last name) D. Appearance of blood product (Satisfactory or unsatisfactory)
32	Place the blood product in a sealed plastic bag for transport through the hospital.
33	If the blood product was double-crossmatched, discard the Blood Bank Product Tag and Administration Record for the other patient and crossmatch additional blood products if indicated.

6. RELATED DOCUMENTS

- Form: Blood Bank Product Tag and Administration Record
- Form: Transfusion Orders
- Form: Request for Transfusion
- SOP: Emergency Release of Blood Products
- SOP: Entering Special Attributes into the LIS
- SOP: Crossmatch
- SOP: Issuing Blood Products in a 930 Medical Transport Cooler
- SOP: Component Quarantine
- SOP: Error Reporting for Blood and Components

7. REFERENCES

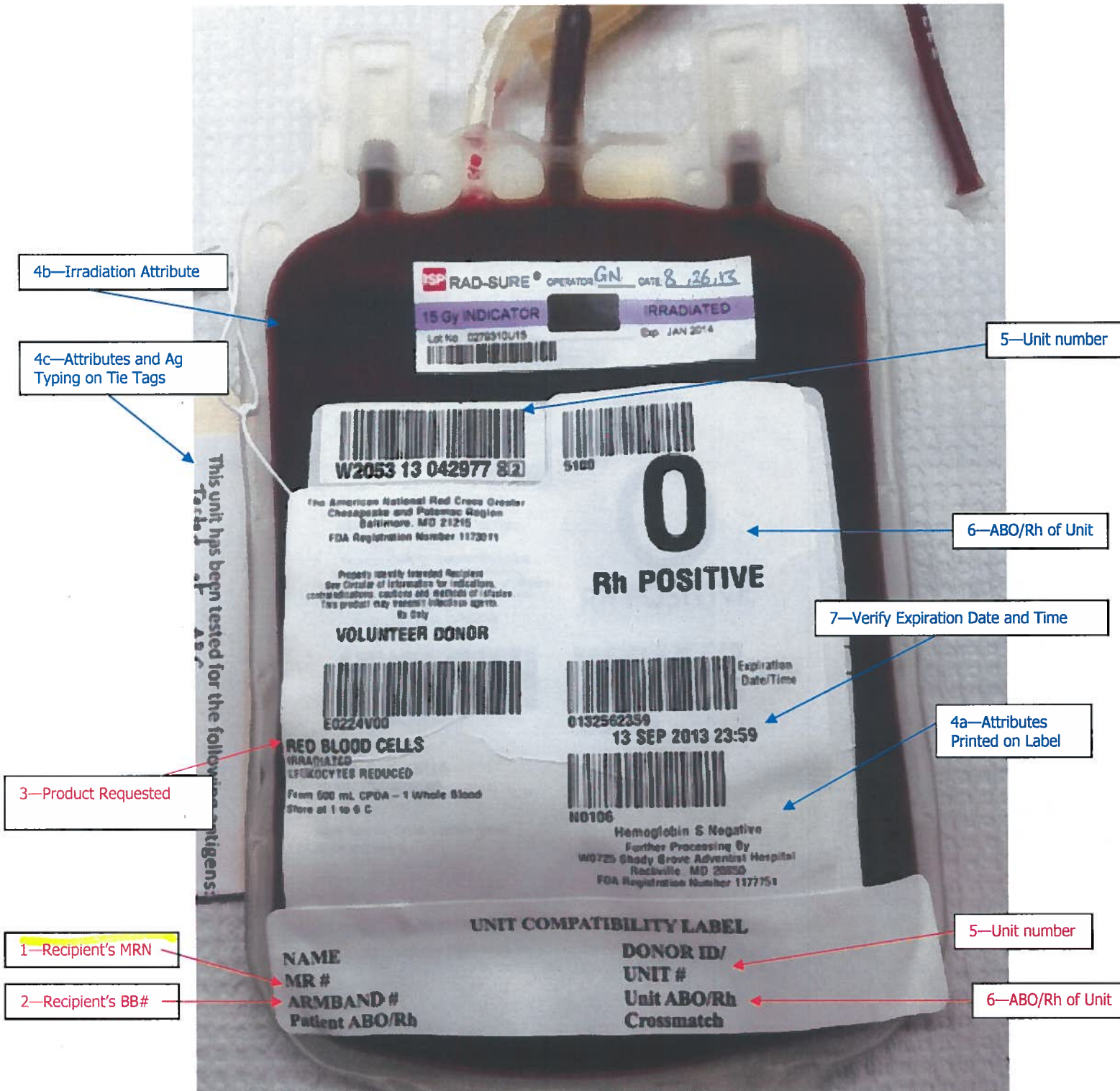
1. Roback, J.D., Combs, M.R., Grossman, B.J., Hillyer, C.D. 2008. Technical Manual of the AABB, 16th ed. AABB Publishing, Bethesda, Maryland.
2. Standards for Blood Banks and Transfusion Services, 2012. AABB, 28th ed. AABB Publishing, Bethesda, Maryland.

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SOP SHB.018.000		
000	10/1/2010	Update owner Section 4: add definitions Section 5: update to reflect LIS upgrade and format change Section 7: update to current versions	S Codina	Dr Cacciabeve
001	8.17.2011	Section 5: Add requirement to restart process if interruption occurs. Add instructions for looking up patient's historical ABO and linked data. Add instructions for tech to verify product requested and all testing has been completed. Clarified wording regarding issuing more than one product at a time. Section 9: add Appendix A regarding readback process	S Codina	Dr. Cacciaveve
002	8.27.2013	Section 5: Removed RhIG references; reworded billing section for clarity; removed references to billing for tubing; Section 9: Updated photo in appendix A for ISBT labeling; removed patient name from readback process; Added instructions to manually document visual inspection and issue process in case LIS issue is not captured.	SCodina	NCacciabeve

9. ADDENDA AND APPENDICES
 Read Back Process for Issuing Blood Products

Form revised 3/31/00



Blood Bank Tech Reads Items in BLUE.
 Pick-Up Person Reads Items in RED.

Form revised 3/31/00

4—Special Attributes
ALWAYS honor attributes in LIS

2—Recipient's BB#

3—Product Requested

1—Recipient's MRN

Blood Bank Tech Reads Items in BLUE.
Pick-Up Person Reads Items in RED.

Appendix A Read Back Process for Issuing Blood Products

Part 1:

1. The blood bank technologist will read from the "Transfusion Orders" or "Request for Transfusion" form that was brought to the blood bank.
2. The person picking up the blood product will read from the "Blood Bank Product Tag."

Step	BB Tech	Pick-Up Person	Pick-Up Person	BB Tech
1	Reads the recipient's medical record number	Verifies the medical record number as it is read	Reads the recipient's medical record number	Verifies the medical record number as it is read
2	Reads the recipient's blood bank number	Verifies the blood bank number as it is read	Reads the recipient's blood bank number	Verifies the blood bank number as it is read
3	Point to the type of blood product being requested then show the pick-up person that the correct type of blood product was issued.	Verify that the product requested is the product being issued		
4	Point to the labeling on the unit that demonstrates the patient's special attributes have been honored when applicable based on LIS info and paper request.	Verify that special attributes ordered are being honored		

Part 2:

1. The blood bank technologist will read from the blood product label.
2. The person picking up the blood product will read from the "Blood Bank Product Tag."

Step	BB Tech	Pick-Up Person	Pick-Up Person	BB Tech
5	Reads the unit number	Verify the unit number as it is read	Reads the unit number	Verify the unit number as it is read
6	Reads the blood group and type of the unit	Verifies the blood group and type as it is read		
7	Verify the product expiration date is current	Verify the product expiration date is current		

Part 3: The blood bank technologist points out the recipient and donor blood types listed on the "Blood Bank Product Tag" and ensures they are compatible.

Non Technical SOP

Title	Issuing Blood Components	
Prepared by	Leslie Barrett	Date: 7/22/2009
Owner	Stephanie Codina	Date: 10/1/2010

Laboratory Approval

Print Name and Title	Signature	Date
<i>Refer to the electronic signature page for approval and approval dates.</i>		
Local Issue Date:		Local Effective Date:

**12 month (or new) management review and approval:
 Signature acknowledges SOP version remains in effect with NO revisions.**

Print Name	Signature	Date

WAH

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1. PURPOSE

To describe the process for issuing blood and blood products.

2. SCOPE

All allocated and crossmatched blood products will be issued and dispensed per this procedure. Refer to procedure, "Emergency Release of Blood Products" for emergency release instructions.

3. RESPONSIBILITY

Both the blood bank staff member who issues the blood component and the clinical representative who receives the product are responsible for identifying the products intended for a patient. Records must be maintained of inspection of the unit for color and appearance, verification of record review, the technologist issuing the component and the person receiving the unit.

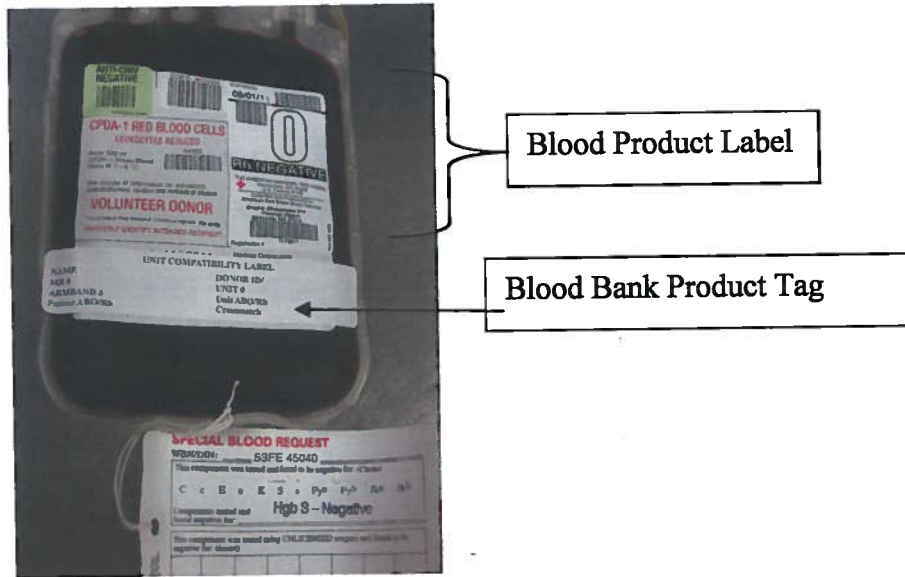
All blood bank staff members are required to demonstrate competency for verification and documentation of component issue in accordance with the policy and procedure.

4. DEFINITIONS

A. Blood Product Label - The label on the actual blood product. This label is attached when the blood product arrives from the supplier and remains attached to the blood product through final disposition.

B. Blood Bank Product Tag - The white label that is printed by the blood bank and attached to a blood product when the blood product is allocated or crossmatched. The product tag prints as part of the pink Blood Bank Product Tag and Administration Record form.

- C. Blood Bank Administration Record - The pink form that prints when a blood product is allocated or crossmatched. The title on the form is the Blood Bank Product Tag and Administration Record. The product tag is removed and applied to the blood product.

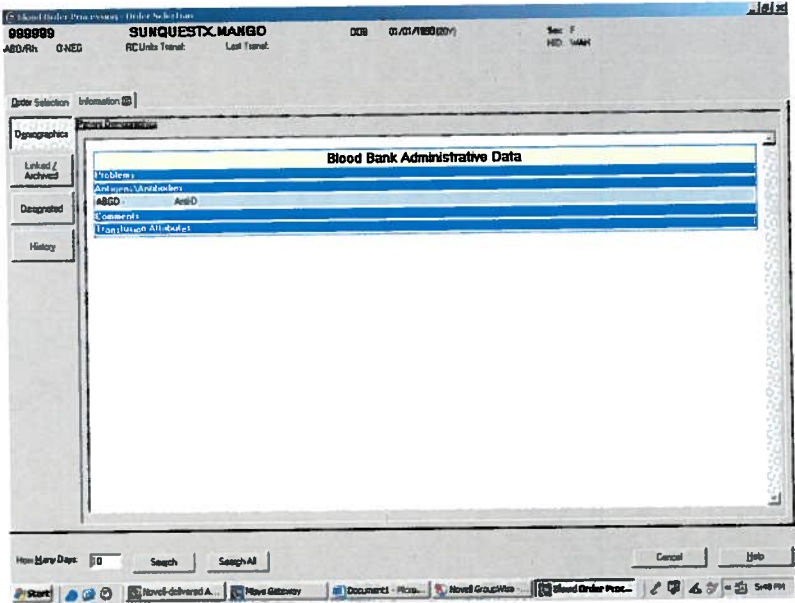


5. PROCEDURE

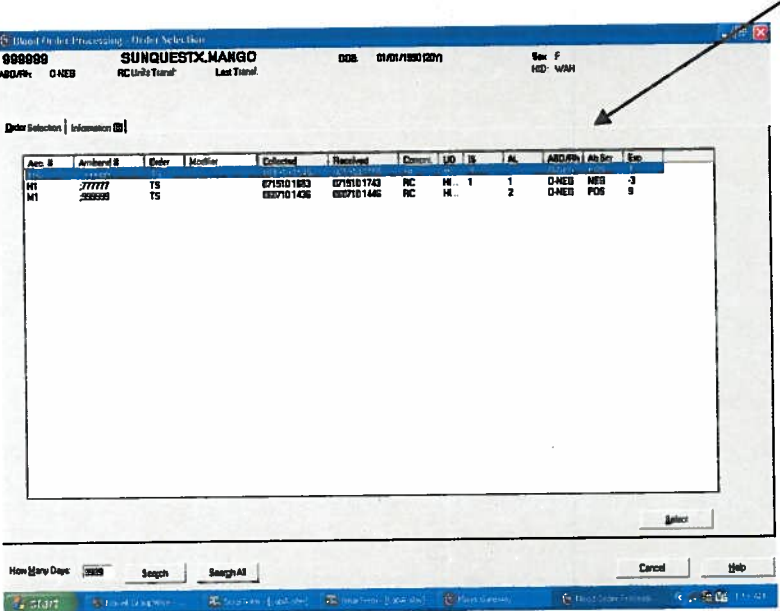
Note: The individual(s) performing this process should NOT be interrupted. If interruptions occur, the checking process must be restarted and repeated.

Issuing

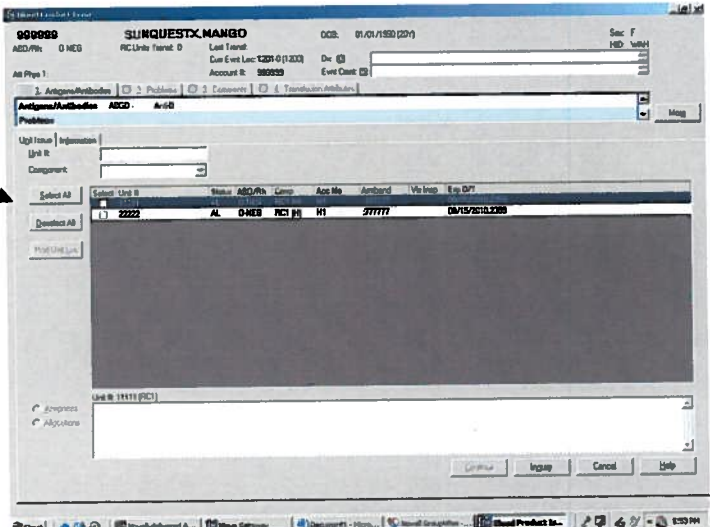
Step	Action
1	Blood products for transfusion may be requested by a trained RN, LPN, unit secretary, unit tech, or physician. <ul style="list-style-type: none"> A. Blood products may be requested via pneumatic tube station. B. Hospital volunteers are not allowed to handle blood products.
2	The person requesting the blood product(s) must present a completed "Request for Transfusion" form. At a minimum, the form must include: <ul style="list-style-type: none"> A. Patient's name B. Patient's medical record number C. Blood bank armband number D. Component type requested E. Signature of requestor F. Date and time of request G. Nursing unit or department Review the form to ensure all information is complete.

Step	Action
3	Access Sunquest function "Blood Order Processing."
4	<p>At the "value" prompt, scan in the patient's medical record number from the "Request for Transfusion" form then click the "search:" button.</p> <p>Note: The medical record number may be typed in only when there is no barcode to scan or when the barcode is damaged or will not read.</p>
5	If more than one patient exists with the same medical record number, choose the correct patient from the pop-up menu then click the "select" button.
6	<p>A "Blood Bank Administrative Data" screen will appear. Verify that the patient's full name and medical record number match the full name and medical record number on the "Request for Transfusion" form exactly.</p> <p>Review the screen for pertinent data such as:</p> <ul style="list-style-type: none"> A. Blood type B. Current or clinically significant antibodies C. Special transfusion attributes (CMV-negative, irradiated, etc.) <p>Verify the blood product meets all patient requirements. If the patient has special attribute markers (such as CMV-seronegative, irradiated, sickle-negative, etc) in his/her historical data, ensure the blood product meets the attribute requirements.</p>  <p>Click on the "Search All" button.</p>

FORM REVISED 5/31/00

Step	Action
7	<p>Click on the order selection folder and verify that the patient has at least 2 ABO/Rh specimens resulted. Note: This requirement can be waived when only RhIG is being issued and when the patient's situation is unstable and universal donor products are being issued.</p> <p>A. These results can be found in the ABO/Rh column. B. Each ABO/Rh determination will be listed in its own row.</p>  <p>In some cases, patient's with blood bank history before LIS upgrade may not show in this field.</p> <p>A. Access "Blood Bank Administrative Data Inquiry" and click on the ABO/Rh tab to see all ABO/Rh determinations to verify. OR B. Click on the "Information" tab, click the "History" box, then click on the "Purged Specimen" to verify.</p>
8	<p>Select the accession on which the blood product is allocated.</p> <p>A. For red cells, this is generally the most current T&S specimen. B. For plasma, platelets, and cryoprecipitate, this is the most current transfuse order.</p> <p>When the specimen result entry appears, verify that all testing has been completed (rbc transfusion only).</p> <p>A. If the patient has a positive antibody screen, verify that the antibody identification has been entered. B. Verify that the appropriate crossmatch procedure (IS or AHG + IS) has been performed per crossmatch procedure. C. Review the patient's diagnosis. If the patient has a diagnosis of sickle cell disease, he/she must also receive sickle-negative red cells.</p> <p>Click the "save" button.</p>

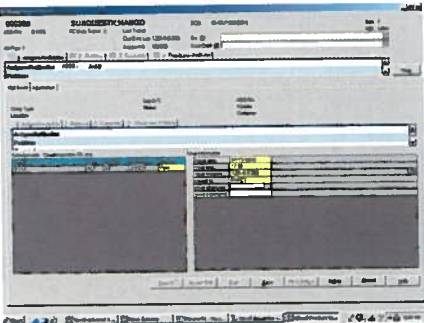
Step	Action
	A. If QA failures were generated during testing, they will reappear. Verify the reason for the QA failure and override if applicable. B. Notify a supervisor if questions arise.
9	A pop-up box will appear: "Continue to Blood Product Issue? <u>I</u> ssue, <u>E</u> mergency, <u>N</u> o, <u>H</u> elp" Click on the "Issue" option.
10	The computer will branch to "Blood Product Issue." Note: If the patient has linked data, a prompt "View Linked Data" will appear. A. Click the "Yes" button. B. View the linked data. C. Click the "Unit Issue" tab to return to the issue screen.
11	Retrieve the requested blood product from the appropriate blood product storage container. A. Ensure that the blood product you are retrieving matches the blood product that was requested. Clarify information with nursing staff if necessary. B. It may be necessary to bring the request form with you to ensure retrieval of the correct blood product for the correct patient. C. Always select autologous units first, directed donor units second, and homologous units last. D. Choose units with shorter expiration dates first.
12	Review the "Blood Bank Product Tag and Administration Record" form to ensure the component type and donor identification number (unit number) listed on the form match those on the blood product. Do not issue the blood product if discrepancies exist.
13	Remove the "Blood Product Tag" label from the pink "Blood Bank Administration Record" and adhere it to the front of the blood product. DO NOT cover any required information on the blood product base label. When possible, do not adhere the label directly to the blood product bag.

Step	Action
14	<p>In the “Unit Number” prompt, scan the unit number from the blood product label. The unit number will only be typed in when the barcode is unreadable.</p>  <p>Note:</p> <ol style="list-style-type: none"> 1. Blood products for more than one patient will never be issued to the same pickup person at the same time. 2. Under normal circumstances, only 1 unit of a blood product will be issued at a time. Two units may be issued for a single patient at one time if any of the following apply: <ol style="list-style-type: none"> A. The units will both be transfused at the same time due to the patient’s medical condition and the patient has 2 IV access sites; one for each unit to be issued. B. The patient is being transfused during renal dialysis. Two units of red blood cells may be issued to renal dialysis at one time. C. The blood products are being issued in a blood product transport cooler. Refer to procedure, “Issuing Blood Products in a 930 Medical Transport Cooler.” D. Two units of plasma may be issued at one time if they will be transfused within the 4-hour timeframe. 3. Multiple products may be issued for one patient if the patient is undergoing an apheresis or exchange procedure. Refer to procedure, “Issuing Blood Products in a 930 Medical Transport Cooler.”

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Step	Action
15	Select the correct component type from the dropdown list. A. The component type will autofill if only one blood product with that unit number is in inventory. B. Click on the “continue” button.
16	Check each blood product label for accuracy and completeness. A. Verify that the product type matches in the LIS and on the blood product label. B. Verify that the expiration date (and time if applicable) matches in the LIS and on the blood product label. C. Verify that the recipient’s blood bank number matches in the LIS and on the blood product label. Pay close attention to the labels and LIS entry of blood products that were thawed, aliquoted, or irradiated by the blood bank.
17	Verify that the unit meets all patient transfusion requirements. <div data-bbox="451 842 1144 1360" style="border: 1px solid black; padding: 5px; margin: 10px 0;"> </div>
18	Perform a visual inspection of the blood product. Appearances that would suggest the blood product should be quarantined include: <ul style="list-style-type: none"> A. Segments that appear lighter or darker in color than the primary bag contents B. Hemolysis C. Purple color to red cells D. Clots E. White particulate matter in the primary container F. Supernatant fluid that is discolored from normal appearance G. Gross lipemia H. Foreign objects in the primary container or ports I. Fluorescent green-colored plasma caused by bacterial contamination (green-colored plasma as a result of biliverdin or birth-control pills is acceptable) J. Dark green-brown-colored plasma due to liver or pancreatic disease.

Compare

Step	Action
19	<p>At the “Vis Insp” prompt, select one of the following:</p> <ul style="list-style-type: none"> A. Click “Pass All” if all units being issued pass the visual inspection. B. Click “Inspect Unit” if any of the units fail visual inspection. <ul style="list-style-type: none"> a. Quarantine and DO NOT ISSUE any blood product that does not pass the visual inspection. b. Notify a supervisor and return the blood product to the blood supplier. <p>Click “Continue” to access the date and time prompts.</p> 
20	<p>At the “date” and “time” prompts, press the “tab” key to default the current date and time. Type in a date in time if the issue time does not match the current time (as after a computer downtime). Review the entry to ensure the correct issue date and time are documented.</p>
21	<p>The “issue location” will default to the location at which the patient is registered.</p>
22	<p>At the “issued to” prompt, type the identity of the person picking up the blood product using one of the following and press the “tab” key:</p> <ul style="list-style-type: none"> A. First initial and last name (such as JDoe) B. First and last initials and title (such as JDRN) C. Tube station location if the blood product is being sent via pneumatic tube (example = TUBE1500)
23	<p>At the “issue comments” prompt, type:</p> <ul style="list-style-type: none"> A. “ICE” if the blood products were issued in a blood product transport cooler. B. “IOR” if the blood products were issued to OR.
24	<p>Perform the readback process per appendix A if the blood product was picked up in person. Readback is waived when sending blood products via pneumatic tube.</p>
25	<p>Press the “save” button.</p>

Step	Action
27	If the unit is picked up by a person, instruct the pickup person to record his/her initials, date and time in the appropriate spaces on the component tag.
28	Document the following information on the pickup form. This information will be used for data entry when the original issue information is not captured in the LIS. A. Unit number of product issued. B. Date and time of issue. C. Person to whom blood product was issued (initials and title, first initial and last name, or tube station). D. Appearance of blood product (satisfactory or unsatisfactory).
29	Place the blood product in a sealed plastic bag for transport through the hospital or via pneumatic tube.
30	If the unit is sent via pneumatic tube, the person removing the blood product from the tube station will complete the information on the yellow copy of the Request for Transfusion form and return the form to the blood bank within 30 minutes.
31	If the blood product was double-crossmatched, discard the Blood Bank Product Tag and Administration Record for the other patient and crossmatch additional blood products if indicated.

Sending Via Pneumatic Tube

Step	Action
1	Place the blood product in a sealed ziplock bag into a tube carrier. Only one unit of blood product may be shipped at a time. If more than one blood product must be tubed, each unit should be sent in a different carrier.
2	Separate the two copies of the Request for Transfusion form. A. Place the top (white) copy in the appropriate bin. B. Place the second (yellow) copy in the tube carrier. Do not place the paper in the sealed bag with the blood product.
3	Close the carrier securely. Ensure that nothing is protruding from the closed carrier to include edges of the paper or plastic bag.
4	Place the carrier upright on the metal arm.

Step	Action
5	Verify the display shows "Station On."
6	Press "Clear."
7	Use the keypad to enter the desired station number and press the "Send" key.
8	Verify on the display that the carrier has been transported to the appropriate station. The carrier should be delivered to the correct station within 5 minutes.
9	The clinical staff member who retrieves the component from the pneumatic tube station is responsible for completion of the Request for Transfusion form. A. He/she will write the date and time that the blood product was received and sign the form. B. The form will be sent via pneumatic tube to the blood bank. Blood bank staff will match it to the white copy of the form and file it in the appropriate box.
10	Contact the patient care area if the completed "Request for Transfusion" form is not returned to the blood bank within 15 minutes. Follow-up routinely until the form is returned.

6. RELATED DOCUMENTS

Form: Blood Bank Product Tag and Administration Record
Form: Request for Transfusion
SOP: Emergency Release of Blood Products
SOP: Entering Special Attributes into the LIS
SOP: Crossmatch
SOP: Issuing Blood Products in a 930 Medical Transport Cooler
SOP: Component Quarantine
SOP: Error Reporting for Blood and Components

7. REFERENCES

1. Roback, J.D., Combs, M.R., Grossman, B.J., Hillyer, C.D. 2008. Technical Manual of the AABB, 16th ed. AABB Publishing, Bethesda, Maryland.
2. Standards for Blood Banks and Transfusion Services, 2012. AABB, 28th ed. AABB Publishing, Bethesda, Maryland.

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SOP WAB302.01		
000	10/1/2010	Update owner Section 4: add definitions Section 5: update to reflect LIS upgrade and format change, add content of SOP WAB305.01 Section 7: update to current versions	S Codina	Dr Cacciabeve
001	2.15.2012	Section 5, step 7: Added instructions to search for historical ABO/Rh data. Section 5, step 8: Added requirements to review testing prior to issuing rbcs Section 5, step 10: Added instructions for linked data Section 5, step 11: Added requirement to ensure correct blood product for correct patient Section 5, step 17: Added step Section 5, step 24: Added step Section 9: Added Appendix A	S Codina	Dr Cacciabeve
002	8.29.13	Section 5: Reworded billing section for clarity Section 9: updated photo in appendix A for ISBT labeling, added instructions to manually document visual inspection and issue process in case LIS issue is not captured.	S Codina	Dr Cacciabeve

9. ADDENDA AND APPENDICES
 Read Back Process for Issuing Blood Products

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Appendix A
Read Back Process for Issuing Blood Products

Part 1:

1. The blood bank technologist will read from the "Request for Transfusion" form that was brought to the blood bank.
2. The person picking up the blood product will read from the "Blood Bank Product Tag."

Step	BB Tech	Pick-Up Person	Pick-Up Person	BB Tech
1	Reads the recipient's full name	Verifies the name as it is read	Reads the recipient's full name	Verifies the name as it is read
2	Reads the recipient's medical record number	Verifies the medical record number as it is read	Reads the recipient's medical record number	Verifies the medical record number as it is read
3	Reads the recipient's blood bank number	Verifies the blood bank number as it is read	Reads the recipient's blood bank number	Verifies the blood bank number as it is read
4	Point to the type of blood product being requested then show the pick-up person that the correct type of blood product was issued.	Verify that the product requested is the product being issued		
5	Point to the labeling on the unit that demonstrates the patient's special attributes have been honored when applicable based on LIS info and paper request.	Verify that special attributes ordered are being honored		

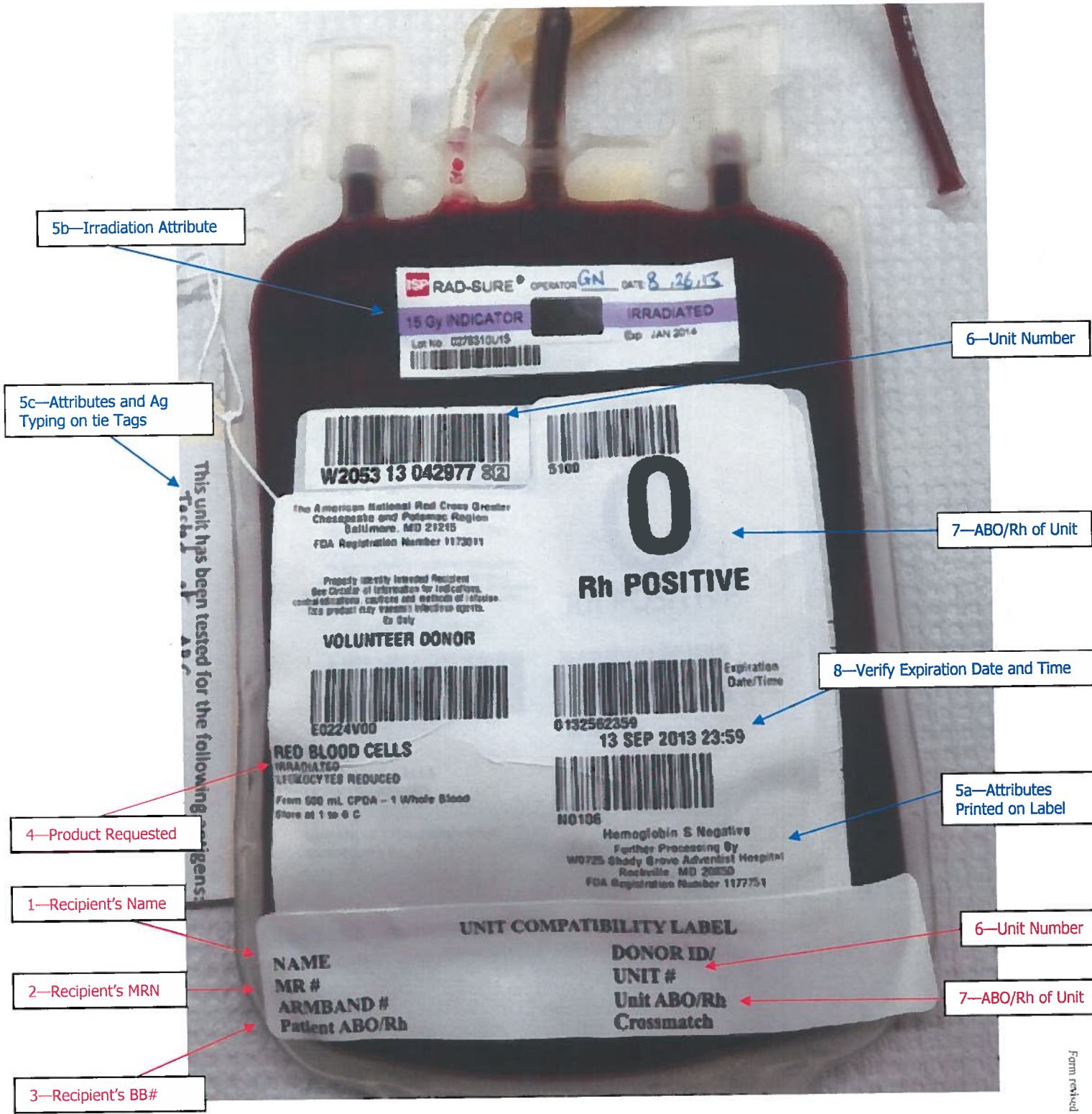
Part 2:

1. The blood bank technologist will read from the blood product label.
2. The person picking up the blood product will read from the "Blood Bank Product Tag."

Step	BB Tech	Pick-Up Person	Pick-Up Person	BB Tech
6	Reads the unit number	Verify the unit number as it is read	Reads the unit number	Verify the unit number as it is read
7	Reads the blood group and type of the unit	Verifies the blood group and type as it is read		
8	Verify the product expiration date is current	Verify the product expiration date is current		

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Part 3: The blood bank technologist points out the recipient and donor blood types listed on the "Blood Bank Product Tag" and ensures they are compatible.



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Blood Bank Tech Reads Items in BLUE.
Pick-Up Person Reads Items in RED.

Order Verification:
Total Number of Units Ordered to be Transfused: 2
Requesting 1st 2nd 3rd 4th Unit (circle one)

3—Recipient's BB#

BLOOD BANK ARMBAND# 190377
COMPONENT FFP
SIGNATURE [Signature]
DATE 2/14/12 TIME 12:20
DEPARTMENT 4200

4—Product Requested

Blood Bank use ONLY:
Unit# 53544361 PF

1—Recipient's Name

 W701222

Washington Adventist Hospital
REQUEST FOR TRANSFUSION
701-222 (07/10)

PATIENT LABEL
 **WILLIE**
12212952 Dr. AYENE, ADAMU D MD
Admit: 02/05/12 F 80 02/19/31
MR # **0107** WAH 4200

2—Recipient's MRN

Blood Bank Tech Reads Items in BLUE.
Pick-Up Person Reads Items in RED.