TRAINING UPDATE

Lab Location:

SGAH and WAH

Date Implemented:

11.1.13

Department:

Blood Bank

Due Date:

11.15.13

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Emergency Release of Blood Products

Description of change(s):

- 1. Updated wording for clarity in the area about checking the patient history.
- 2. Added a statement not to withhold blood products if the patient's name or MRN are unknown.
- 3. Added instructions for resulting emergency release units when no T&S is received (ie when the patient is transferred or expires before the T&S is drawn)
 - a. Order a TRRC
 - b. Issue the units
 - c. Enter a comment explaining they were issued emergency release and no T&S samples was received with reason
 - d. Cancel the T&S as "No Sample Received"

Title	Emergency Release of Blood Products	
Prepared by	Stephanie Codina	Date: 10.30.2011
Owner	Stephanie Codina	Date: 10.30.2011

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

Review:		
Print Name	Signature	Date

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1. PURPOSE

This procedure outlines the process that will be followed for the emergency release of blood products. In these situations, the provider must weigh the risk of transfusion against the risk of non-transfusion. The provider accepts responsibility for the transfusion by signing an emergency release form.

Examples include, but are not limited to,

- Release of blood products before pre-transfusion testing is complete (Ex = massively bleeding patient)
- Release of blood products that do not meet the patient's specific transfusion requirements (Ex =issuing sickle untested units to a sickle cell patient in an emergency).
- Release of blood products that yield unacceptable pre-transfusion testing results (Ex=issue of incompatible red cells to a patient with a warm autoantibody).

2. SCOPE

This procedure applies to all situations in which blood products are issued outside of normal blood bank protocol.

3. RESPONSIBILITY

All blood bank staff members must understand and adhere to this procedure when issuing blood products that do not meet routine blood bank transfusion requirements.

4. **DEFINITIONS**

N/A

5. PROCEDURE

Request for Emergency Release Blood Products

Step	Action
1	 Hospital personnel will notify the blood bank via telephone that emergency release blood products are needed. A. The patient's name and medical record number will be provided via telephone. B. Blood bank personnel will instruct hospital personnel to complete the emergency release form. C. Blood bank personnel will instruct hospital personnel to bring one preprinted hospital label to the blood bank for each blood product unit requested.
	Note: Blood bank may encounter situations in which blood products are requested BEFORE a patient arrives at the hospital or is registered to assign a name or medical record number. DO NOT withhold blood products in this situation. Issue the blood products and get the name of the person picking up the products for follow up when the patient is more stable.
2	Blood bank personnel will immediately perform a history check on the patient per procedure, "Patient History Check" if time permits. A. Review patient's antibody history. B. Review patient's transfusion requirements. C. If the patient HAS a current T&S and meets ABO retype requirements, crossmatch and issue blood products per routine procedure. No emergency release form is required. D. If the patient HAS a current T&S but DOES NOT HAVE a retype on file, crossmatch and issue universal donor products (O red cells and AB plasma products). No emergency release form is required.

Step	Action
3	If the patient does NOT have a current T&S on file, immediately select blood products for transfusion. A. Select O-negative red blood cell products. a. NEVER issue group specific blood products based on historical records. b. Do not issue group specific blood products if the ABO retype requirement has not been met. c. O-positive red cell products may be transfused with pathologist approval. Male patients and females of non-childbearing age are generally switched to Rh-positive blood products if they will use more than 4 units. B. Select AB plasma products. a. NEVER issue group specific plasma based on historical records. b. Do not issue group specific plasma if the ABO retype requirement has not been met. C. Any ABO may be issued for platelet and cryoprecipitate products. D. Select products that meet patient transfusion requirements if possible in the limited amount of time. Example—issue CMV-seronegative units if the patient has a CMV marker. Do not delay transfusion to locate units meeting the patient's transfusion requirements.
4	Pull a segment from each red cell to be issued. Label the segment with the full unit number and keep for crossmatch.
5	Place an orange "Uncrossmatched Blood" sticker on each unit to be issued.

Emergency Issue Prior to Receipt of Type & Screen Specimen

Lmergen	gency Issue Prior to Receipt of Type & Screen Specimen	
Step	Action	
1	Obtain one blank, "Blood Product Administration Record" form for each unit	
1	to be issued.	
	A. Place one patient label on each form.	
	a. The patient labels will be delivered by hospital staff when the	
	blood products are picked up.	
	b. Write the patient's name and medical record number on the	
	form if no label is provided.	
	B. Write the unit number of the blood product to be issued on the	
	corresponding form. Alternatively, a sticker from the back of the	
	blood product may be adhered to the form.	
	C. Document "Uncrossmatched Blood" on the form. This can be done by	
	stamping the form or by adhering an orange "Uncrossmatched Blood" sticker.	
	D. Discard the unit compatibility label on the form.	

Step	Action
2	Review the emergency release form. A. Do not delay blood product issue if the form is incomplete. B. Check the applicable boxes to indicate which testing is not complete: a. Patient ABO/Rh Unknown b. Pretransfusion Tests Not Complete i. ABO/Rh ii. Antibody Screen iii. Crossmatch C. Fill in the requested information for each unit to be issued. a. Unit number/DIN b. Unit ABO/Rh c. Unit expiration date d. Type of blood product (circle correct choice) D. If the provider signature is not present, request the name of the requesting provider and print it on the blood bank copy of the form, below the signature line. This will be used for follow-up if the signed form is not returned to the blood bank.
3	Document the following information on the form. A. Date of issue B. Time of issue C. Identification of person picking up blood products D. Identification of tech issuing blood products
4	Readback does not have to be performed at the time of issue for EMERGENCY RELEASE blood products without a T&S specimen. However, the blood bank tech will ensure the following: A. The blood product is a universal donor product (group O for red cells and group AB for plasma products). B. The expiration date has not been exceeded. C. The unit number listed on the blood product and the Emergency Release form match EXACTLY.

Step	Action	
5	Perform a visual inspection of the blood product. Appearances that would suggest the blood product should be quarantined include: 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	
6	If more than 2 units are issued at one time, pack the blood products in a blood product cooler per procedure, "Issuing Blood Products in a 930 Medical Transport Cooler."	
7	Keep one copy of the form and send the remaining copies with the blood products.	
8	AFTER the blood products have been manually issued and sent to the patient care area, complete the computer documentation. A. Order a T&S specimen via "Order Entry" if not already ordered. B. Send a phlebotomist to collect the T&S specimen STAT.	

Step	Action
9	Complete the patient testing. A. If a T&S sample was received: a. Test the sample per routine procedure. b. Allocate and crossmatch blood products per routine procedure. B. Notify the clinical pathologist and treating provider immediately if incompatibility (due to antibody or other cause) is detected during testing. If the patient is transferred or expires prior to receipt of the T&S specimen, A. Cancel the T&S specimen indicating no specimen was received. B. Place a transfuse order for the product that was released to the patient. Example = order a TRRC if red cells were issued. C. Allocate the blood products to the transfuse order. D. Result the testing. a. Enter "9" for "Not Done" in the testing grids. b. Interpret the crossmatch as compatible by pressing the "[" key. c. Interpret the TS field as "OK to transfuse" by pressing the "]" key. E. Add a comment indicating why the original T&S was not tested. Example = Patient transferred or expired prior to collection of T&S specimen.
10	 Issue the blood products in the computer after the T&S specimen has been physically received or after the patient expired or has been transferred. A. Issuing the blood products in the computer prior to receipt of the specimen will automatically receive the specimen in the system. This can cause confusion with hospital personnel. B. Be sure to document the correct issue date and time in the LIS from the emergency release form. C. The issue of all units must be documented in the computer even when the units are later returned to inventory.
11	The patient care area will return the blood bank copy of the completed emergency release form to the blood bank following transfusion. The original form gets placed in the patient medical record. A. Place the completed form in the supervisor's box for review. B. The form will be retained per Quest policy.

Emergency Issue—Type and Screen Specimen in Laboratory / Testing Incomplete

Step

Action

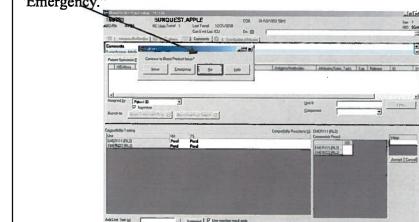
This procedure will generate QA failures in the LIS system due to incomplete testing.

The QA failures may be overridden. However, this increases the time needed to complete the issues process. Blood products can be issued per the above procedure if time does not allow for issuing in the LIS system.

- Allocate the blood products in "Blood Order Processing."

 A. Only issue group specific blood products when the ABO/Rh of the current specimen has been resulted and the patient's ABO retype requirement has been met. Refer to procedure, "Confirmation of Patient's Blood Type (ABO Confirmation)."
 - B. The LIS may generate a QA failure message if all testing has not been completed. Override the QA failure. If time does not permit, issue blood products on downtime per above procedure.
- 2 Click the save button.

The prompt "Continue to Blood Product Issue?" appears. Click on the button "Emergency."



At the "Unit #" prompt, scan the units into the LIS then click the "Continue" button.

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Step

5	Perform a visual inspection of the blood product. Appearances that would
	suggest the blood product should be quarantined include:
	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
	1 "
6	At the "Vis Insp" prompt, select one of the following:
	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.
	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.
	Click "Continue" to access the date and time prompts.
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7	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.
0	
8	The "issue location" will default to the location at which the patient is
	registered.

Action

Step	Action
9	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: A. First initial and last name (such as JDoe) B. First and last initials and title (such as JDRN)
10	At the "issue comments" prompt, type: A. "UBAP" for uncrossmatched blood approved by physician. B. "IICE" if the blood products were issued in a blood product transport cooler. C. "IOR" if the blood products were issued to OR.
11	Press the "save" button.
12	Patient identification labels will print. A. Apply one label to each unit to be issued. B. Verify the unit number/DIN on the patient label and blood product unit match EXACTLY.
13	Readback does not have to be performed at the time of issue for EMERGENCY RELEASE blood products prior to completion of the T&S specimen. However, the blood bank tech will ensure the following: A. The blood product is a universal donor product (group O for red cells and group AB for plasma products). B. The expiration date has not been exceeded. C. The unit number listed on the blood product and the pink form match EXACTLY.
14	Complete the patient testing and crossmatch the issued blood products per crossmatch procedure. Notify the clinical pathologist and treating provider immediately if incompatibility (due to antibody or other cause) is detected during testing.
15	The patient care area will return the blood bank copy of the completed emergency release form to the blood bank following transfusion. The original form gets placed in the patient medical record. A. Place the completed form in the supervisor's box for review. B. The form will be retained per Quest policy.

Emergency Release—Testing Complete but Units Do Not Meet Specifications

Emergency Release—Testing Complete but Units Do Not Meet Specifications					
Step	Action				
1	 This procedure is followed when a physician requests transfusion of blood products that do not meet patient specifications. Examples include but are not limited to: A. Issue of incompatible or least incompatible blood products in a patient with a warm autoantibody. B. Issue of sickle-untested units to a patient with sickle cell disease. C. Issue of homologous platelets to a patient who requires HLA-matched platelets. D. Issue of red blood cells to a patient who has an antibody and time does not allow for antigen typing the units. 				
2	Generate a Blood Bank Product Tag and Administration Record per crossmatching procedure. Override QA failures that are generated due to incomplete testing.				
3	Complete an emergency release form by filling in the following information. A. Patient's name and medical record number (lower, right-hand corner) B. Patient ABO/Rh C. Unit number/DIN D. ABO/Rh of Unit E. Expiration Date of Unit F. Circle Blood Product Type G. In the "Pretransfusion tests not completed" area, check the "Other" box and indicate the reason for the emergency release on the line. Send the form to the patient care area so the physician can complete the top box and return the completed form to blood bank.				
4	Blood products may be issued as soon as the signed form is returned to the blood bank. The form is maintained per blood bank procedure.				
5	Issue units per procedure, "Issuing Blood Components" with a comment indicating a signed emergency release form is on file.				

6. RELATED DOCUMENTS

SOP: Patient History Check SOP: Issuing Blood Components

7. REFERENCES

None

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes WAB304.01, SGAH.B304.01		
000	10.22.2013	Section 5: Updated wording of patient history check step for clarity. Added statement not to withhold blood if the patient's name or MRN are unknown. Added additional instructions for resulting emergency issue when no T&S is received. Footer: version # leading zero's dropped due to new EDCS in use as of 10/7/13.	SCodina	NCacciabeve

9. ADDENDA AND APPENDICES

None