Lab Location:	SGAH and WAH	**Date Implemented:**	08.21.2015
Department:	Blood Bank	**Due Date:**	08.31.2015

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Transfuse Orders

Description of change(s):

1. Added neonatal transfusion indications to this list.
2. Neonatal indications are different than adult indications, but they work the same way.
3. If indication "Hct <30% with symptom or risk" is selected, a symptom or risk must also be entered.

Quest
Diagnostics

Document No.: SGAH.BB879[1]

Title: Transfuse Orders

Owner: LESLIE.X.BARRETT LESLIE BARRETT

Status INWORKS

Effective Date: 09-Sep-2015

Next Review Date:

Non-Technical SOP

Title	Transfuse Orders	
Prepared by	Stephanie Codina	Date: 06.20.2014
Owner	Stephanie Codina	Date: 06.20.2014

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 steps that will be taken when processing orders to transfuse blood products.

2. **SCOPE**
   This procedure applies to any transfuse order that is received in the blood bank.

3. **RESPONSIBILITY**
   All blood bank staff members must understand and adhere to this procedure for processing transfusion orders.

4. **DEFINITIONS**
   N/A

5. **PROCEDURE**

Step	Action
1	Transfuse orders will be placed by the provider or patient care area using the electronic medical record system. Blood bank staff members will place transfuse orders in the Sunquest system per procedure in the following situations: 1. During downtimes of the hospital computer system when the laboratory computer system is operational. 2. When verbal orders are accepted from the operating room and in urgent situations. 3. When blood products are prepared per the cardiac surgery transfusion protocol.

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Step	Action
2	Blood bank staff members are responsible for answering the following prompts when the transfuse order is placed via the Sunquest system. Refer to appendix A for more information. A. Physician's instructions B. Number of units requested C. Indications for transfusion D. Signs, Symptoms, Risks (only required when a red cell transfuse order is placed with the indication "Hb >7 or <10 with symptoms or risk"). E. Hemoglobin S (Only required when HbS (sickle) negative red cells are requested) F. Irradiated (Only required when irradiated red cells or platelets are requested) G. CMV-negative (Only required when CMV-seronegative red cells or platelets are requested) H. HLA-matched (Only required when HLA-matched platelets are requested)
3	Once an order has been received, blood bank staff members will review the indications for transfusion and **ALL ATTRIBUTE FIELDS FOR EACH TRANSFUSE ORDER**. A. If an attribute is requested, the provider will be required to enter an indication. B. If an attribute is NOT requested, the entry will be blank. This will cross into the blood bank system as "Do not report." C. The first time an attribute is ordered, BB staff members will enter the requirement in the patient's blood bank administrative data (BAD) file per procedure. All subsequent transfusions will meet the transfusion specifications until we are notified by a provider in writing that the attribute is no longer needed or the recipient no longer requires the attribute per policy.
4	Blood bank staff members will select, prepare, allocate, and/or crossmatch blood products that meet the patient transfusion specifications. A. Red cells will be allocated to the T&S order and not the TRRC order. B. Blood bank staff members will enter the comment "ADTS" which translates to "Added to T&S" into the "BCOM" field of the TRRC order.

6. RELATED DOCUMENTS

SOP: Order Entry, Entering Orders in the GUI System
SOP: Blood Bank Verbal Product Orders
SOP: Entering Special Transfusion Attributes into the LIS

7. REFERENCES

None

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8.   REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
0	8.5.2015	Section 9: Added appendix B for neonatal appropriateness criteria; updated adult red cell criteria upper limit from hb 10 to hb 9; moved attributes from appendix A to appendix C	SCodina	NCacciabeve

9.   ADDENDA AND APPENDICES
Appendix A: Mnemonics Used When Resulting a Transfuse Order in the Lab System
Appendix B: Mnemonics Used When Resulting a NEONATAL Transfuse Order in the Lab System
Appendix C: Mnemonics Used When Resulting Special Attribute Requests in the Lab System

Appendix A
Mnemonics Used When Resulting a Transfuse Order in the Lab System

1. **Indications for a Transfuse Red Cell (TRRC) Order**

Mnemonic	Translation
HB7	Hb <7
HB710	Hb >7 and <9 with symptoms or risk*
ACUHE	Acute hemorrhage
PERIOP	Perioperative + anticipated bleeding
HB10AB	Hb >9 with active bleeding
HBPA	Hb >9 in the absence of bleeding (must freetext reason)
CSPREO	Cardiac surgery pre-op protocol

*This indication requires a sign, symptom, or risk to be entered in the "Signs,Symptoms,Risk" field.

2. **Signs, Symptoms, and Risks**
   ONLY required when a TRRC order is placed and the indication for transfusion is "Hb>7 and <9 with symptoms or risk

Mnemonic	Translation
POSHYP	Postural hypotension
TACHY	Tachycardia
TIA	Transient ischemic attack
ALMS	Altered mental status
SOFS	Signs of shock
DYSPN	Dyspnea
SYNCO	Syncope
ANGI	Angina
IRMI	Risk due to myocardial ischemia / CAD
ICRH	Risk due to hemoglobinopathy
IRVHD	Risk due to valvular heart disease
ICRRF	Risk due to respiratory failure
ICRCHD	Risk due to congenital heart disease
IRC	Risk due to CHF
ICRC	Risk due to COPD
ICRS	Risk due to sepsis
INCRSK	Risk due to cerebral ischemia / TIA / stroke

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3. Indications for a Transfuse Platelet (TPP) Order

Mnemonic	Translation
PL15	Plt ct <15,000
PLL50	Plt ct <50,000 with active bleeding
PLL100	Plt ct <100,000 with invasive procedure
PLAB	Plt dysfunction with active bleeding
PLIP	Plt dysfunction with invasive procedure
ACUHE	Acute hemorrhage
PAO	Pathologist approval obtained

4. Indications for a Transfuse Plasma (TPLAS) Order

Mnemonic	Translation
ABCOAG	Active bleeding with coagulopathy
IPCOAG	Invasive procedure with coagulopathy
REPFV	Replacement of factor V
TTPUR	TTP
PEP	Plasma exchange procedure
ACUHE	Acute hemorrhage
PAO	Pathologist approval obtained

5. Indications for a Transfuse Cryoprecipitate (TCRYO) Order

Note: 1 dose = 10 units of cryoprecipitate
5 units = 1 bag of cryoprecipitate
Cryoprecipitate should be ordered by factors of 10 (10 = 1 dose/2 bags, 20 = 2 doses/4 bags, 30 = 3 doses/6 bags)

Mnemonic	Translation
HPFIB	Hypofibrinogenemia
DYFIB	Dysfibrinogenemia
ACUHE	Acute hemorrhage

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Appendix B
Mnemonics Used When Resulting a NEONATAL Transfuse Order in the Lab System

1. Indications for a Transfuse Red Cells Neonatal (TRCNEO) Order

Mnemonic	Translation
HCT20	Hct <20%
HCT30	Hct <30% with symptoms or risk
H30O2	Hct <35% and on >35% O2 hood
H35AP	Hct <35% and on CPAP
H35V	Hct <35% with ventilation (mean pressure >6-8mm of H_2O)
H45HD	Hct <45% with congenital cyanotic heart disease

2. Signs, Symptoms, and Risks
ONLY required when a TRCNEO order is placed and the indication for transfusion is "Hct <30% with symptoms or risk."

Mnemonic	Translation
TACHR	Tachycardia (HR >180 beats/min for 24 hours)
TACRR	Tacypnea (RR >80 beats/min for 24 hours)
APNEA	Apnea (>6 episodes in 12 hours)
BRADY	Bradycardia (2 occasions in 24 hours requiring ventilation and medication)
LWTG	Low weight gain (<10 g/day over 4 days)
L35O2	<35% O_2 hood
NASC	On nasal cannula
BBCPAP	On CPAP

3. Indications for a Transfuse Platelet Neonatal (TPLTNEO) Order

Mnemonic	Translation
PL30	Plt ct <30,000
PLL50	Plt ct <50,000 with active bleeding
PLL100	Plt ct <100,000 with invasive procedure
PLAB	Plt dysfunction with active bleeding
PLIP	Plt dysfunction with invasive procedure
PLRB	Plt ct <50,000 and at risk of bleeding

4. Indications for a Transfuse Plasma Neonatal (TPLANE) Order

Mnemonic	Translation
ABCOAG	Active bleeding with coagulopathy
IPCOAG	Invasive procedure with coagulopathy
REPFV	Replacement of factor V

5. Indications for a Transfuse Whole Blood Neonatal (TWBNEO) Order

Mnemonic	Translation
NEXWB	Neonatal exchange transfusion

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Appendix C
Mnemonics Used When Resulting Special Attribute Requests in the Lab System

1. Indications for CMV-Seronegative Red Cell and Platelet Products

Mnemonic	Translation
IUTRAN	Intrauterine transfusion
HPCT	Hematopoietic progenitor cell transplant
SOTRP	Solid organ transplant (CMV- organ)
HIVPOS	HIV-positive
PAO	Pathologist approval obtained
BPREG	Pregnancy

2. Indications for Irradiated Red Cell and Platelet Products

Mnemonic	Translation
MALYM	Malignant lymphoma
PAT	Purine analogue treatment
GVHD	GVHD
APAN	Aplastic anemia
PANCY	Pancytopenia
ALLCT	ALL with stem cell transplant
AMLCT	AML with stem cell transplant
CID	Congenital immune deficiency
IUTRAN	Intrauterine transfusion

3. Indications for Hemoglobin S Negative Red Cell Products

Mnemonic	Translation
SCD	Sickle cell disease (not trait)

4. Indications for HLA-Matched Platelet Products

Mnemonic	Translation
BPLT	Platelet refractoriness

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