

**TRAINING UPDATE**

**Lab Location:** SGMC and WAH      **Date Implemented:** 12.11.2017  
**Department:** Blood Bank      **Due Date:** 12.31.2017

**DESCRIPTION OF PROCEDURE REVISION**

**Name of procedure:**

Physician Notification for Autologous Donor Testing

**Description of change(s):**

1. Updated procedure to align with ARC procedure
2. Updated infectious disease tests performed on donor units (including auto units)
3. No change to procedure (notification with positive or incomplete testing; written approval to send for positive HIV, HIV NAT, or HBsAg)

**Electronic Document Control System**



**Document No.:** SGAH.BB39[1]

**Title:** Physician Notification for Autologous Donor Testing

**Owner:** LESLIE BARRETT

**Status:** INWORKS

**Effective Date:** 10-Jan-2018

**Next Review Date:**

Non-Technical SOP

<b>Title</b>	<b>Physician Notification for Autologous Donor Testing</b>	
<b>Prepared by</b>	Stephanie Codina	<b>Date:</b> 3/10/2010
<b>Owner</b>	Stephanie Codina	<b>Date:</b> 3/10/2010

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

<b>Review:</b>		
<b>Print Name</b>	<b>Signature</b>	<b>Date</b>

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Form revised 3/31/00

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**1. PURPOSE**

To describe the procedure for notifying physicians of autologous donors with positive and/or incomplete viral testing or a significant donor history.

**2. SCOPE**

This procedure applies to an autologous donor unit that has incomplete or positive infectious disease testing.

**3. RESPONSIBILITY**

The patient's physician and the Blood Bank Medical Director or designee must sign the authorization for release and shipment form for any autologous unit that has not been tested for required infectious disease markers or tests positive for HIV or HBsAg.

The Blood Bank staff must return the form with both physicians' signatures to the American Red Cross.

**4. DEFINITIONS**

NA

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**5. PROCEDURE**

Step	Action
1	The following infectious disease tests are run on all donor units, including autologous donations. <ul style="list-style-type: none"> <li>A. Hepatitis B surface antigen (HBsAg)</li> <li>B. Antibodies to hepatitis C (anti-HCV)</li> <li>C. Antibodies to human immunodeficiency viruses (anti-HIV-1/HIV-2)</li> <li>D. Antibodies to human T-cell lymphotropic virus type I and type II (anti-HTLV-I/II)</li> <li>E. Serological test for syphilis (STS)</li> <li>F. Multiplex NAT for HIV-v/HCV/HBV</li> <li>G. Antibodies to hepatitis B core antigen (anti-HBc)</li> <li>H. West Nile virus (WNV)</li> <li>I. Antibodies to <i>Trypanosoma cruzi</i> (T. cruzi/Chagas)</li> <li>J. Zika virus</li> </ul>
2	ARC will notify the referring physician and the transfusion service when a unit tests reactive/positive for an infectious disease test OR when a unit is released without completion of infectious disease testing.
3	ARC will require a signed Authorization for Release from both the physician and the transfusion service prior to shipping when an autologous donor unit tests reactive for HIV, HIV NAT, and/or HBsAg. <ul style="list-style-type: none"> <li>A. ARC will obtain the signature of the treating physician.</li> <li>B. ARC will fax a copy of the form to blood bank.</li> </ul>
4	The Blood Bank Medical Director or designee must sign the form and the form must be returned to ARC before the autologous unit in question will be shipped.
5	Completed forms (faxed and/or original copies) are filed in the "Autologous" file. Forms are retained for 5 year/s.
6	Units are stored on the "Autologous" area of the blood bank refrigerator. <ul style="list-style-type: none"> <li>A. Autologous units with positive infectious disease testing should be stored in a plastic bag.</li> <li>B. A conspicuous tie tag or label shall indicate in a conspicuous fashion that the infectious disease testing was not completed prior to shipment. This tag MUST remain on the unit until transfusion is complete.</li> </ul>

**6. RELATED DOCUMENTS**  
 N/A

**7. REFERENCES**

1. Fung, MK, Grossman, BJ, Hillyer, CD, and Westhoff, CM. 2014. Technical Manual of the AABB, 18<sup>th</sup> ed. AABB Publishing, Bethesda, Maryland.
2. Standards for Blood Banks and Transfusion Services, 2016. AABB, 30<sup>th</sup> ed. AABB Publishing, Bethesda, Maryland.
3. American Red Cross Donor and Client Support Center. The Transfusion Service Handbook. Document 11.4.ref025. 06.17.

**8. REVISION HISTORY**

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes WAH-SGAH B611.01		
000	12/11/17	Header: Added WAH Section 5: Added West Nile Virus and Zika Virus and removed Dengue from the test list. Updated formatting to align with ARC procedure. Footer: Version # leading zero's dropped due to new EDCS in use as of 10/7/13.	SCodina	NCacciabeve

**9. ADDENDA AND APPENDICES**

None

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