

TRAINING UPDATE

Lab Location: SGMC and WAH **Date Implemented:** 4.16.2018
Department: Blood Bank **Due Date:** 4.30.3018

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Blood Collection Expiration Tube Audit and Form

Description of change(s):

1. Form has been updated for ease of use. Staff only have to check boxes and no longer write out information.
2. We created a schedule of nursing units to audit. We will no longer audit every unit every month.
3. Completed audits go to the supervisor who will collate the data on a focused review form for tracking.

Blood Collection Tube Expiration Audit Form

Date of audit:	Unit/Department:	Tech Code:
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Tube Types	No Tubes Found (v)	Expiration Date Acceptable (v)	Expire Within 30 days (v)	Expired Tubes Found (v)	Document Number of short dated/expired tubes and disposition (discarded, moved to lab, etc.)
Lavender Top/EDTA: 4.5 ml					
Lavender Microtainer Map /k EDTA 1.0mg					
Lavender Top/EDTA: 10 ml/ Pink/Top EDTA: 6.0ml					
Green top/ PST/ Lithium heparin: 4.5 ml					
Green <i>Microtainer</i> tubes / bullets					
Dark Green: 10 ml/ Sodium Heparin					
Dark Green: 4.0 ml Sodium Heparin					
Tiger Top/ SST/ 7.5 ml					
Vacurette, Blue Top, 9NC, Coagulation Sodium Citrate 3.2 %, 2.0 ml tube					
Lt. Blue Top: 1.8 ml					
Lt. Blue Top: 2.7 ml					
Dark Blue/ Trace Element/ serum					
Dark Blue/ Trace Element/ K2 EDTA					
Tan Top tube: K2 EDTA 5.4 mg, 3.0 ml					
Red top tubes: 6.0 ml Plain – no gel					
Red top tubes: 4.0 ml Plain – no gel					
Red <i>Microtainer</i> tubes/bullets					
Gray Top tube: 4.0 ml					
Gray Top tube: 6.0 ml					
Yellow ACD Solution A: 8.5 ml					
Yellow ACD Solution B: 6.0 ml					
QuantiFERON TB Gold Tubes					
Aerobic Blood Culture bottles					
Anaerobic Blood Culture bottles					
Myco/F Lytic bottles					
Newborn Screening Card					

Reviewed by/date:

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Document No.: AG.F.264[3]

Title: Blood Collection Tube Expiration Audit Form

Owner: LESLIE BARRETT

Status: INWORKS

Doc Effective Date: 16-May-2018

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Document No.: SGAH.P855[1]

Title: Blood Collection Expiration Tube Audit

Owner: LESLIE BARRETT

Status: INWORKS

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Next Review Date:

Non-Technical SOP

Title	Blood Collection Expiration Tube Audit	
Prepared by	Samson Khandagale	Date: 11/20/2013
Owner	Stephanie Codina	Date: 4/12/2018

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

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Form revised 3/31/00

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1. PURPOSE
 To outline the process for ensuring all blood collection tubes stored in the hospital are within the manufacturer’s expiration.

2. SCOPE
 This procedure applies to all blood collection tubes used for collection of laboratory specimens.

3. RESPONSIBILITY
 All field operations staff members must understand and adhere to this procedure when completing specimen tube audits.

4. DEFINITIONS
 None

5. PROCEDURE

Step	Action
1	The Field Operations Supervisor or Group Lead will assign audits per the schedule in appendix A.
2	Obtain one audit form per unit. Document the date of audit, unit/department, and tech code of the auditor on the top of the form.
3	Walk to the unit and notify the charge nurse that you will be performing an audit. Ask the charge nurse to show you each location where blood collection tubes are stored.
4	Examine the expiration dates of tubes and document on the audit form. A. If the case is intact (unopened), review and record the expiration date of the case. B. If the case is opened, pull a few of the tubes and check the expiration dates.

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	<ul style="list-style-type: none"> a. If the expiration dates are the same, document the date. b. If the expiration dates are different, continue checking all of the tubes for expiration. C. If the tubes are in a bag or container, pull a few of the tubes and check the expiration dates. <ul style="list-style-type: none"> a. If the expiration dates are the same, document the date. b. If the expiration dates are different, continue checking all of the tubes for expiration.
5	<p>Document your findings on the audit form.</p> <ul style="list-style-type: none"> A. Place a checkmark (√) in the appropriate column for each tube type. B. Document the disposition of tubes that are expired or will expire in 30 days. <ul style="list-style-type: none"> a. Discard tubes that have expired. b. Remove tubes that will expire within 30 days. Place them in a bag and write the expiration date in large letters on the front of the bag. Place the bag in the phlebotomy area to see if the tubes can be used prior to expiration.
6	<p>The completed audit forms are given to the supervisor. The supervisor will:</p> <ul style="list-style-type: none"> A. Document results on a focused review form for presentation at LPIC. B. Notify the nurse leaders of the units where expired tubes were found (verbally or via the hospital incident reporting system) and document the notification on the focused review form.

6. RELATED DOCUMENTS

Blood Collection Tube Expiration Audit Form (AG.F264)

7. REFERENCES

N/A

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
0	4/12/18	Updated owner Header: added WAH Section 5: Updated wording and format for clarity. Section 6: Updated form for ease of use. Section 9: Created a schedule of units to be audited.	SCodina	NCacciabeve

9. ADDENDA AND APPENDICES

Appendix A: Specimen Tube Audit Schedule

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Appendix A

Specimen Tube Audit Schedule

Month	SGMC Units to Audit	WAH Units to Audit
January and July	<ul style="list-style-type: none"> • Pre-Op • PACU • OIC • Outpatient Lab • Laboratory 	<ul style="list-style-type: none"> • ED • Laboratory • Infusion Center
February and August	<ul style="list-style-type: none"> • ED • Peds ED 	<ul style="list-style-type: none"> • Transcare • EP Lab • Cath Lab
March and September	<ul style="list-style-type: none"> • 2A • 2B • 2C • 2D 	<ul style="list-style-type: none"> • Pre-Op/Short Stay • PACU • 1500
April and October	<ul style="list-style-type: none"> • 3A • 3B • 3F • NICU 	<ul style="list-style-type: none"> • 2200 • 2500 • 5100
May and November	<ul style="list-style-type: none"> • ICU • Peds • CVIR 	<ul style="list-style-type: none"> • 3000 • 3100 • 3200 • 3300
June and December	<ul style="list-style-type: none"> • 4A • 4B • 4C • 4D 	<ul style="list-style-type: none"> • 4100 • 4200 • 4300

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