TRAINING UPDATE

Lab Location:

WOMC and FWMC

Date Implemented:

1/3/23 1/18/23

Department:

Blood Bank

Due Date:

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Blood Bank Turnaround Time

Description of change(s):

- 1. Workup must be started within 30 minutes for any specimen that is referred to another site for workup (specifically when FWMC workups are sent to WOMC.
- 2. The time of specimen receipt and time workup started must be documented on the referral form.
- 3. The testing laboratory (WOMC) must notify the testing blood bank staff (FWMC) if the workup will not be completed within 2 hours.
- 4. The referring lab (FWMC) must update the patient care area.
- 5. Notifications must be documented on the referral form.

AHC.BB77 Blood Bank Turn-Around-Time

Copy of version 7.0 (approved and current)

Last Approval or

Periodic Review Completed

12/21/2022

Controlled Copy ID 402423

Location

inspection

Next Periodic Review

Needed On or Before

12/21/2024

Organization Adventist HealthCare

Effective Date

12/21/2022

Approval and Periodic Review Signatures

Туре	Description	Date	Version	Performed By	Notes
Approval	Lab Director	12/21/2022	7.0	Nicolas Cacciabeve MD	
Approval	BB approval	12/21/2022	7.0	Stephanie Codina	
Approval	Lab Director	12/19/2022	6.0	Nicolas Cacciabeve MD	
Approval	BB approval	12/19/2022	6.0	Stephanie Codina	
Approval	Lab Director	8/31/2021	5.0	Nicolas Cacciabeve	
Approval	BB approval	8/31/2021	5.0	Stephanie Codina	
Approval	QA approval	8/31/2021	5.0	Leslie Barrett	
Periodic review	Medical Director	11/11/2019	4.0	Nicolas Cacciabeve	
Periodic review	ВВ	10/4/2019	4.0	Stephanie Codina	
Approval Captured outside MediaLab	Lab Director	12/14/2017	4.0	Nicolas Cacciabeve	Recorded on 7/18/2019 by Leslie Barrett (104977) when document added to MediaLab
Periodic review Captured outside MediaLab	Designated Reviewer	12/14/2017	4.0	Nicolas Cacciabeve	Recorded on 7/18/2019 by Leslie Barrett (104977) when document added to MediaLab

Approvals and periodic reviews that occurred before this document was added to the MediaLab Document Control system may not be listed.

Prior History

Updated prefix 9/17/21

Version History

Version	Status	Туре	Date Added	Date Effective	Date Retired
7.0	Approved and Current	Major revision	12/21/2022	12/21/2022	Indefinite
6.0	Retired	Major revision	12/19/2022	12/19/2022	12/21/2022

5.0	Retired	Major revision	8/30/2021	9/17/2021	12/19/2022
4.0	Retired	First version in Document Control	7/18/2019	12/18/2017	9/17/2021

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Site: Shady Grove Medical Center, White Oak Medical Center,

Fort Washington Medical Center

Title: Blood Bank Turnaround Time

Non-Technical SOP

Title	Blood Bank Turnaround Time	
Prepared by	Stephanie Codina	Date: 2/7/2011
Owner	Stephanie Codina	Date: 2/7/2011

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:			

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1. PURPOSE

To establish the turnaround times for blood bank testing and the availability of blood products.

2. SCOPE

This procedure applies to all blood bank orders.

3. RESPONSIBILITY

All blood bank staff members must understand and strive to meet established turnaround times in blood bank. Quality always takes precedence over turnaround time.

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Fort Washington Medical Center Title: Blood Bank Turnaround Time

4. **DEFINITIONS**

Turnaround Time (TAT):

- A. For testing, the amount of time measured between specimen receipt and specimen result.
- B. For blood products,
 - a. If the patient HAS a current T&S, the amount of time from order receipt until blood product availability.
 - b. If the patient DOES NOT HAVE a current T&S, the amount of time from specimen completion until product availability.

5. PROCEDURE

Step	Action					
1	These turnaround times are expected values. There will be instances where they may not be met due to workflow and volume.					
	Notify the in-charge tech or a supervisor if workflow issues prevent timely resulting. He/she will assess the need to bring in additional support staff members.					
2	Specimen collection will take place within the following times for blood bank orders: A. STAT requests will be collected within 15 minutes of order receipt. B. ASAP requests will be collected within 30 minutes of order receipt. C. Routine requests will be collected with the next collection round. Generally, samples will be collected within 2-4 hours of order time.					
3	Established TAT for specimen testing: A. Type and screen and crossmatch (if requested) a. STAT and ASAP requests will be resulted within 90 minutes of receipt (though the target remains 60 minutes). b. Routine requests will be resulted within 4 hours of receipt. c. Additional time may be necessary if an unexpected antibody or ABO discrepancy is detected. B. ABO confirmation (retype) testing a. Specimens resulted within 10 minutes of receipt when there is a STAT or ASAP need for blood. b. Specimen resulted within 4 hours of receipt when there is no current need for blood products. C. Antibody identification referred from another site a. Workups referred from another site will be started within 30 minutes of specimen receipt in the testing lab. b. The testing lab will give the referring lab a status update if the workup has not been completed within 2 hours of specimen receipt in the testing lab.					

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Step	Action				
	D. Crossmatch				
	a. Immediate spin crossmatches will be completed within 10 minutes of transfusion request or T&S completion when blood products are ordered STAT or ASAP.				
	b. AHG crossmatches will be performed as soon as possible given the recipient's antibody and availability of blood products.				
	c. Crossmatches for patients that require antigen-negative blood products (such as sickle cell patients) will be completed within 30 minutes of unit selection or receipt.				
	E. RhIG evaluation or fetal cell screen testing will be completed within 4 hours.				
4	Blood Product Availability.				
-	A. Platelets				
	a. 30 minutes when platelets are available in-house.				
	b. 2 hours when platelets must be ordered and delivered for STAT orders.				
	c. 4 hours when platelets must be ordered and delivered for routine orders.				
	B. Plasma				
	a. 30 minutes for STAT orders				
	b. 60 minutes for routine orders				
	C. Cryoprecipitate				
	a. 30 minutes for STAT orders				
	b. 60 minutes for routine orders				
5	Emergency release blood products are available immediately in urgent situations. A. Issue O-negative red cells and AB plasma products without regard to recipient blood type.				
	B. Refer to procedure, "Emergency Release of Blood Products."				
	C. The urgent need must be communicated to the blood bank.				

6. RELATED DOCUMENTS

SOP: Emergency Release of Blood Products

7. REFERENCES

None

Site: Shady Grove Medical Center, White Oak Medical Center,

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Title: Blood Bank Turnaround Time

8. REVISION HISTORY

Version				
	Date	Reason for Revision	Revised By	Approved By
		Supersedes WAH-SGAH B312.002	} :	
000	1.20.12	Section 5: Add item 1, re-number remaining items	SCodina	NCacciabeve
001	12.10.13	Section 5: Added ASAP expectations. Deleted RhIG TAT. Footer: version # leading zeros dropped due to new EDCS in use as of 10/7/13.	SCodina	NCacciabeve
2	12.24.15	Section 5: Updated T&S TAT from 60 to 90 min. Section 6: Updated name of emergency release SOP.	SCodina	NCacciabeve
3	12.7.17	Header: Added WAH	LBarrett	NCacciabeve
4	8.30.21	Header: Changed WAH to WOMC, added FWMC Footer: Updated prefix to AHC	LBarrett	NCacciabeve
5	12.18.22	Added AbID TAT	SCodina	NCacciabeve
6	12.21.22	Changed AbID TAT; deleted 10 hr TAT and added requirement to give a status update after 2 hours	SCodina	NCacciabeve

9. ADDENDA AND APPENDICES

None