TRAINING UPDATE

Lab Location: Department: All Sites Blood Bank Date Implemented: Due Date:

emented: 9.8.23 9.22.23

DESCRIPTION OF PROCEDURE REVISION

Name of procedure:

Issuing Blood Components

Description of change(s):

The "Request for Transfusion" form is a 2-part form. The second page is only used if we are sending blood products via the pneumatic tube system. If someone comes to pick up blood (such as from Rehab or at FWMC), we only need one copy of the form.

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Fort Washington Medical Center

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Non-Technical SOP

Title	Issuing Blood Components	
Prepared by	Leslie Barrett	Date: 7/22/2009
Owner	Stephanie Codina	Date: 10/1/2010

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 describe the process for issuing blood and blood products.

SCOPE 2.

All allocated and crossmatched blood products will be issued and dispensed per this procedure. Refer to procedure, "Emergency Release of Blood Products" for emergency release instructions.

3. RESPONSIBILITY

The blood bank staff members must understand and adhere to this procedure when issuing blood products for transfusion.

4. **DEFINITIONS**

A. Blood Product Label - The label on the actual blood product that contains the unit number, product code, expiration date, and special attributes. This label is attached

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when the blood product arrives from the supplier and remains attached to the blood product through final disposition.

B. Patient/Unit Label - The white label that is printed by the blood bank and attached to a blood product when the blood product is allocated or crossmatched. This label contains information about recipient (name, MRN, BB number, birthdate, ABO/Rh, and crossmatch results) and the donor unit (unit number/DIN, expiration date and time, volume, ABO/Rh, and attributes).

5. PROCEDURE

Issuing

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Step	Action
1	Blood products for transfusion may be requested by any paid hospital
	employee.
	A. Blood products may be requested via pneumatic tube station.
	B. Hospital volunteers and students are not allowed to handle blood
	products without supervision.
	Note: The Rehabilitation Hospital will only transfuse blood products during
	the dayshift when a provider is on site.
2	The person requesting the blood product(s) must present a completed "Request
	for Transfusion" form. At a minimum, the form must include:
	A. Patient's name
	B. Patient's medical record number
	C. Blood bank armband number
	D. Product type requested (red cell, plasma, platelet, cryo)
	E. Number of blood product requested
	F. Verification that the following have been verified:
	a. Transfusion order
	b. Patient's hospital armband
	c. IV access
	d. Baseline vital signs
	e. Consent
	G. Special transfusion attributes, if applicable
	H. Signature of requestor
	I. Date and time of request
	J. Nursing unit or department
	K. Pneumatic tube station number if blood product is being transported via
	pneumatic tube
	Review the form to ensure all information is complete.
	The blood bank only requires the top copy of the request form if someone is picking up the blood. Two copies of the form are required if the blood product is being issued via pneumatic tube.

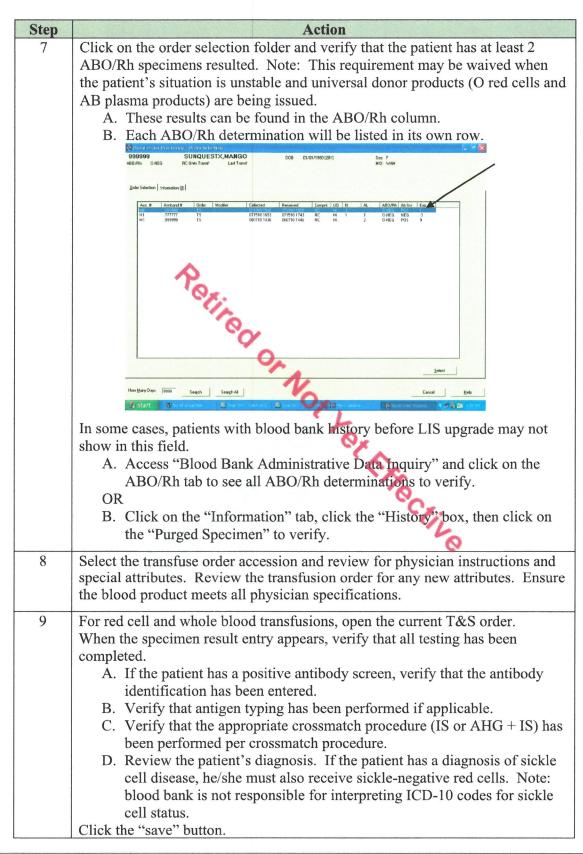
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Step	Action
3	Access Sunquest function "Blood Order Processing."
⚠ St	tart Critical Step
4	At the "value" prompt, scan in the patient's medical record number from the "Request for Transfusion" form then click the "search: button.
	Note: The medical record number may be typed in only when there is no barcode to scan or when the barcode is damaged or will not read.
5	If more than one patient exists with the same medical record number, choose the correct patient from the pop-up menu then click the "select" button.
6	A "Blood Bank Administrative Data" screen will appear. Verify that the patient's full name and medical record number on the "Request for Transfusion" form exactly. Review the screen for pertinent data such as: A. Blood type B. Current or clinically significant antibodies C. Blood bank armbana number Note: If present, linked and/or archived data will appear first. Click demographics to see current data.
	Click on the "Search All" button.

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04	A -10
Step	Action
10	A pop-up box will appear: "Continue to Blood Product Issue? Issue, Emergency, No, Help" Click on the "Issue" option.
11	The computer will branch to "Blood Product Issue." Note: If the patient has linked data, a prompt "View Linked Data" will appear. A. Click the "Yes" button. B. View the linked data. C. Click the "Unit Issue" tab to return to the issue screen.
12	Retrieve the requested blood product from the appropriate blood product storage container. A. Bring the request form with you to ensure retrieval of the correct blood product for the correct patient. B. Ensure the patient name and MRN on the blood product match the patient name and MRN on the request form. C. Ensure that the blood product you are retrieving matches the blood product that was requested. Clarify information with nursing staff if necessary. D. Always select autologous units first, directed donor units second, and homologous units last. E. Choose units with shorter expiration dates first.
13	At the "Unit Number" prompt, scan the unit number from the blood product label. The unit number will only be typed in when the barcode is unreadable. Then, at the "Component" prompt, scan the E code from the donor unit. Component Component
	Note: 1. Blood products for more than one patient will never be issued to the same pickup person at the same time.

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Step	Action
	 Under normal circumstances, only 1 unit of a blood product will be issued at a time. Two units may be issued for a single patient at one time if any of the following apply: A. The units will both be transfused at the same time due to the patient's medical condition and the patient has 2 IV access sites; one for each unit to be issued. B. The patient is being transfused during renal dialysis. Two units of red blood cells may be issued to renal dialysis at one time. C. The blood products are being issued in a blood product transport cooler. This is preferred when issuing to the OR. D. Two units of plasma may be issued at one time if they will be transfused within the 4-hour timeframe. Multiple products may be issued for one patient if the patient is undergoing an apheresis or exchange procedure provided the products are issued in a transport cooler.
14	Verify the E code and description on the blood product label are correct and all blood component preparation functions have been completed.
15	Verify that the unit meets all patient transfusion requirements. Transfusion Sundustria S

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Step	Action
16	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 (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.
17	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.
	State
18	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.
19	The "issue location" will default to the location at which the patient is registered.

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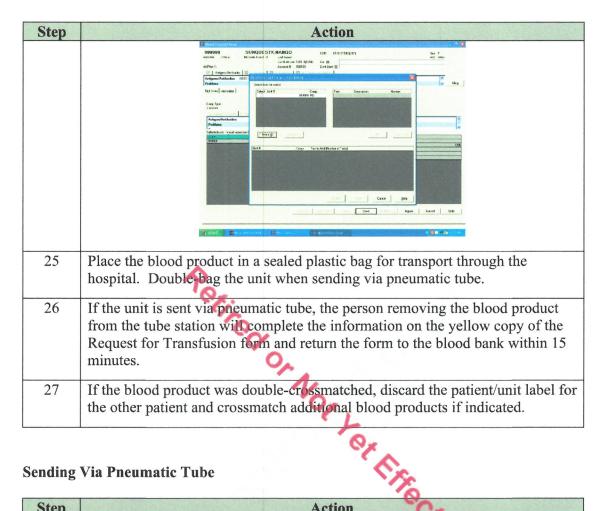
Step	Action
20	At the "issued to" prompt, type the identity of the person picking up the blood
	product using one of the following and press the "tab" key: A. First initial and last name (such as JDoe)
	B. First and last initials and title (such as JDRN)
	C. Tube station location if the blood product is being sent via pneumatic
	tube (example = TUBE15)
21	At the "issue comments" prompt, type:
	A. "IICE" if the blood products were issued in a blood product transport cooler.
	B. "IOR" if the blood products were issued to OR.
	-
22	Perform the readback process per appendix A or B.
23	Press the "save" button.
⚠ E	nd Critical Step
24	A billing screen will appear Bill charges if indicated.
	A. If no charges are to be billed, click on the "cancel" button. Note:
	Failure to click the cancel button may void the issue process in the
	computer. B. If charges are to be billed,
	a. Select the unit(s) that the charges will be added to by clicking
	the box next to the unit number.
	b. The right column of the billing screen will activate.
	c. In the "test" column, type in the billing code.
	i. Type ";DCMV" to charge for a CMV-seronegative
	blood product if the patient requires CMV-seronegative
	blood products. For neonatal aliquots, bill only the first
	aliquot from a unit.
	ii. Charge for sickle negative units for neonates on the first aliquot only.
	1. Type ";SCS" for sickle testing performed in
	house.
	Type ";RHGBS" for sickle testing performed at ARC.
	iii. Type ";IRRC." This charge is only used for neonatal
	red cell aliquots. iv. Type ";IRRP." This charge is only used for neonatal
	platelet aliquots if they are not prepared using PRT
	platelets.
	d. In the "number" column, type the number of those charges to be
	billed.
	e. Click the "OK" button.
	f. Click the "save" button.

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Sending Via Pneumatic Tube

Step	Action
1	Place the blood product in two sealed ziplock bags then place into a tube carrier. Only one unit of blood product may be shipped at a time. If more than one blood product must be tubed, each unit should be sent in a different carrier.
2	Separate the two copies of the Request for Transfusion form. A. Place the top (white) copy in the appropriate bin. B. Place the second (yellow) copy in the tube carrier. Do not place the paper in the sealed bag with the blood product.
3	Close the carrier securely. Ensure that nothing is protruding from the closed carrier to include edges of the paper or plastic bag.
4	Place the carrier upright on the metal arm.
5	Verify the display shows "Station On" or "Ready."
6	Press "Clear" or "Standard Send."
7	Use the keypad to enter the desired station number and press the "Send" key.

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Step	Action
8	Verify on the display that the carrier has been transported to the appropriate station. The carrier should be delivered to the correct station within 5 minutes.
9	The clinical staff member who retrieves the component from the pneumatic tube station is responsible for completion of the Request for Transfusion form. A. He/she will write the date and time that the blood product was received and sign the form. B. The form will be sent via pneumatic tube to the blood bank. Blood bank staff will match it to the white copy of the form and file it in the appropriate box.
10	Contact the patient care area if the completed "Request for Transfusion" form is not returned to the blood bank within 15 minutes. Follow-up routinely until the form is returned.

Downtime Process

Step	Action
1	The "Downtime Blood Administration" form is used during periods of computer downtime.
2	If Sunquest is up, print a patient/unit label for the blood product and place it in the box in the upper, left-hand corner of the form. If Sunquest is down, legibly handwrite the following information in the appropriate boxes on the form: A. Recipient's full name B. Recipient's medical record number C. Recipient's blood bank number D. Recipient's birthdate E. Recipient's ABO/Rh F. Results of crossmatch testing G. Donor ID (DIN/unit number) H. Unit expiration date and time
	I. Unit ABO/Rh J. Unit Attributes
3	At the time of issue, legibly handwrite the following information on the form: A. Date and time of issue B. Person/pneumatic tube issued to C. Visual inspection of the blood product
4	Nursing staff will document the transfusion on the form and scan into the electronic medical record.

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6. RELATED DOCUMENTS

Form: Request for Transfusion

Form: Downtime Blood Administration form SOP: Emergency Release of Blood Products SOP: Entering Special Attributes into the LIS

SOP: Crossmatch

SOP: SOP: Issuing Blood Products in a Max+ Blood Shipper

SOP: Quarantine of Blood Products

7. REFERENCES

1. Standards for Blood Banks and Transfusion Services, current edition. AABB Publishing, Bethesda, Maryland.

8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SOP WAB302.01		
000	10/1/2010	Update owner Section 4: add definitions Section 5: update to reflect LIS upgrade and format change, add content of SOP WAB305.01 Section 7: update to current versions	S Codina	Dr Cacciabeve
001	2.15.2012	Section 5, step 7: Added instructions to search for historical ABO/Rh data. Section 5, step 8: Added requirements to review testing prior to issuing rbcs Section 5, step 10: Added instructions for linked data Section 5, step 11: Added requirement to ensure correct blood product for correct patient Section 5, step 17: Added step Section 5, step 24: Added step Section 9: Added Appendix A	S Codina	Dr Cacciabeve
002	8.29.13	Section 5: Reworded billing section for clarity Section 9: updated photo in appendix A for ISBT labeling, added instructions to manually document visual inspection and issue process in case LIS issue is not captured.	S Codina	Dr Cacciabeve
003	2.26.15	Sections 4, 5, 6: Removed references to the Blood Bank Product Tag and Administration Record and replaced with patient/unit label. Section 5: Added sending via pneumatic tube for both SGMC and WAH. Added references to the "Downtime Blood Administration" form. Added downtime process. Footer: Version # leading zeros dropped due to new EDCS in use as of 10/7/13.	S Codina	Dr Cacciabeve

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Version	Date	Reason for Revision	Revised By	Approved By
4	2.14.17	Header: Added WAH	L Barrett	Dr Cacciabeve
5	1.15.18	Section 3: Simplified responsibility	S Codina	Dr Cacciabeve
		Section 5: Updated checking attributes on		
		transfusion order form; Added ARH statement		
		Appendix B: Added for clarity		
6	2.11.20	Header: Changed WAH to WOMC	S Codina	Dr Cacciabeve
		Section 5: QA failures from testing will no longer		
		need to be overridden at issue. Removed from		
	1	SOP. Removed references to 930 transport cooler		
		and replaced with transport cooler.		
		Section 6: Updated documents		
		Section 7: Updated references		
7	9.18.20	Section 9: Updated Appendices A & B to require	SCodina	N Cacciabeve
		readback of expiration date and time		
8	8 8.11.21 Header: Added FWMC		SCodina	NCacciabeve
		Section 5: Clarified wording of irradiation billing		
		for aliquots. No practice changes.		
		Footer: Updated prefix to AHC		
9	9.7.23	Updated the definition of blood product label for	SCodina	NCacciabeve
		clarity. Added clarification that only 1 copy of the		
		request form is needed if the unit is not issued via		
		pneumatic tube. Updated references.		

9.

- ADDENDA AND APPENDICES

 A. Read Back Process for Issuing Blood Products with a Pickup Person
- B. Read Bank Process for Issuing Blood Products when using the Pneumatic Tube

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Appendix A Read Back Process for Issuing Blood Products with a Pickup Person

Blood	Blood bank staff should prompt the pickup person what to read off. For example, "Read me the patient name."					
Step	Pick-Up Person	BB Tech	BB Tech	Pick-Up Person		
1	Reads the recipient's full name from the Patient/Unit label	Verifies the name on the Request for Transfusion form as it is read	Reads the recipient's full name from the Request for Transfusion form	Verifies the name on the Patient/Unit label as it is read		
2	Reads the recipient's medical record number from the Patient/Unit label	Verifies the medical record number on the Request for Transfusion form as is read	Reads the recipient's medical record number from the Request for Transfusion form	Verifies the medical record number on the Patient/Unit label as it is read		
3	Reads the recipient's blood bank armband number from the Patient/Unit label	Verifies the blood bank armband number on the Request for Transfusion form as it is read	Reads the recipient's blood bank armband number from the Request for Transfusion form	Verifies the blood bank armband number on the Patient/Unit label as it is read		
4	Reads the unit number from the Patient/Unit label	Verifies the unit number on the blood product label as it is read	Reads the unit number from the blood product label	Verifies the unit number on the Patient/Unit label as it is read		
5	Reads the expiration date and time from the Patient/Unit label	Verifies the expiration date and time on the blood product label as it is read	OF YORK			
6	Reads the patient blood type and Rh from the black side Patient/Unit label	Notes the unit blood type and Rh on the blood product label and verifies the product group and type is compatible with the patient's group and type as it is read	OF YOUR FROCE	io		
7			Points to the type of blood product being requested then show the pick-up person that the correct type of blood product was issued by pointing to the product description.	Verifies that the product requested is the product being issued		
8			Points to the labeling on the unit that demonstrates the patient's special attributes have been honored when applicable based on LIS info and paper request.	Verify that special attributes ordered are being honored		

Resolve any discrepancies before issuing the blood product.

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Appendix B Read Back Process for Issuing Blood Products when using the Pneumatic Tube

Step	Action				
1	Compare the recipient's full name on the Request for Transfusion form to the name on the Patient/Unit Label to ensure they match exactly.				
2	Compare the recipient's medical record number on the Request for Transfusion form to the medical record number on the Patient/Unit Label to ensure they match exactly.				
3	Compare the recipient's blood bank armband number on the Request for Transfusion form to the blood bank armband number on the Patient/Unit Label to ensure they match exactly.				
4	Compare the unit number on the blood product label to the unit number on the Patient/Unit Label to ensure they match exactly.				
5	Compare the expiration date and time on the blood product label matches the expiration date and time listed on the patient/unit label and verifies the expiration date/time have not been exceeded.				
6	Compare the blood group and type on the blood product label to the blood group and type on the Patient/Unit label to ensure the product is compatible with the recipient blood type.				
7	Verify the product requested on the Request for Transfusion form is the product being issued.				
8	Verify all special attributes have been honored.				
9	Resolve any discrepancies before issuing the blood product.				
	Tresolve any discrepancies before issuing the blood product.				

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