



**American  
Red Cross**

*National Capital and Greater  
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09/15/2023

To our Hospital Customers:

The Baltimore Immunohematology Reference Laboratory (IRL) has been 24/7 for many years. Currently, we are experiencing a staffing shortage and have limited staffing on third shift. In response to our limited staffing on third shift, the Baltimore IRL is implementing an Urgency Assessment Tool for Patient Workups Only, Monday – Sunday and Holidays from 10pm-7am. Please be aware that extended turn-around-times for patient workups may occur. **At this time, there are no changes for STAT IRL Antigen Negative Blood Orders during Limited Staffing Hours.**

The purpose of the *Baltimore IRL Urgency Assessment Tool for Patient Workups Only* is to limit IRL testing services to only STAT Scenarios outlined on the attached tool. Completion of the tool will be required for those patient workups determined to be STAT after Hospital Transfusion Service MD (TSMD) to American Red Cross (ARC) Physician Consultation for work to be performed during limited staffing hours.

When the need arises for a STAT Patient Workup to be completed by the IRL during limited staffing hours, please notify your Hospital TSMD (or patient's referring physician) and assess the urgency based on the criteria listed in the *Baltimore IRL Urgency Assessment Tool for Patient Workups Only*. It is acceptable for Blood Bank staff or the TSMD to complete the tool. Once determined that the patient workup is STAT, a discussion is **required** to occur between the Hospital TSMD and the ARC Physician. ARC Physician approval is required for testing to occur during limited staffing hours.

Once the ARC Physician has approved the patient workup is STAT, Blood Bank staff will proceed with placing the STAT Service Order in Connect and will be required to upload the completed *Baltimore IRL Urgency Assessment Tool For Patient Workup Only* to the Connect Service Order.

**Baltimore IRL Limited staffing days/hours are:**

- Monday – Sunday and Holidays: 10 pm – 7am

**Baltimore IRL Routine staffing days/hours are:**

- Monday – Friday, 7am – 10pm

When a STAT workup is received during routine hours that cannot be completed before limited staffing hours begin, the IRL Technologist will request the Blood Bank Facility to complete the *Baltimore Urgency Assessment Tool for Patient Workups Only*. In addition, it is acceptable for the IRL Technologist to initiate/complete the assessment tool with the assistance of the Blood Bank Facility should the need arise. A discussion between the Hospital TSMD and the ARC Physician will still be required, as described above.

Please see the attached copy of the *Baltimore IRL Urgency Assessment Tool For Patient Workups Only*. Please maintain copies at your facility for use. Use of the tool will begin on *Monday, 10/09/2023 at 10PM*.

Please know, we will continue to work on improving our staffing on third shift; however, the use of the *Baltimore IRL Urgency Assessment Tool For Patient Workups Only* will be required and may be in use for many months.

If there are any questions, please contact Debi Giardina, Director, IRL, at 410-764-5320 or by email at [debi.giardina@redcross.org](mailto:debi.giardina@redcross.org).

# Form: Baltimore IRL Urgency Assessment Tool for Patient Workups Only

**\*FORM IS REQUIRED FOR ALL STAT IRL WORKUPS REQUESTED DURING LIMITED STAFFING HOURS\***

**BEFORE submitting a STAT IRL Workup during limited staffing hours, consultation with your Transfusion Service Medical Director (TSMD) or patient's referring physician is required to appropriately assess urgency based on the criteria listed below. If the patient workup is determined to be STAT by the TSMD, a discussion between the TSMD AND the American Red Cross (ARC) Physician is required. ARC Physician approval is required for testing during limited staffing hours. Please contact the ARC On-Call Physician at: 1-888-622-0550.**

**Note: This form is not applicable to STAT IRL Antigen Negative Blood, please proceed to Connect to place Ag Neg Orders.**

**If the TSMD and ARC Physician discussion confirms the case to be STAT, proceed with placing the STAT Service Order in Connect and upload the completed "Baltimore IRL Urgency Assessment Tool for Patient Workups Only" to the Connect Service Order. If STAT criteria are not met, proceed with placing the Service Order in Connect as Routine or ASAP.**

**\*PLEASE COMPLETE ALL SECTIONS INDICATED BY AN ASTERISK\***

\*Patient's most recent hemoglobin/hematocrit values (include date/time): \_\_\_\_\_  
 \*Date/time blood is required: \_\_\_\_\_  
 \*Reason for expedited handling: \_\_\_\_\_

*Patient Name:	*Patient Diagnosis:
*Referring Hospital:	*Referring Hospital Blood Bank Telephone Number:
*Name of Referring Physician to Contact:	*Telephone Number of Referring Physician to Contact:

**\*Assessing Urgency, circle Yes or No**  
 The following questions are designed to help identify STAT IRL Patient Work-up referrals. A "STAT" IRL Work-up should be considered for those patients who: have a "Yes" Answer to any of symptoms listed below or for Questions 1-4.

- \*Is the patient experiencing any signs of cardiac/respiratory disease or distress?**
  - Compromised cardiopulmonary reserve (presence of cardiac and/or pulmonary disease)? **Yes / No**
  - Increased rate/magnitude of blood loss (actual) anticipated? **Yes / No**
  - Atherosclerotic Disease (cardiovascular, cerebrovascular, peripheral vascular disease)? **Yes / No**
  - Altered O<sub>2</sub> consumption (affected by pharmacologic agents, sepsis, or other factors)? **Yes / No**
- Is the patient experiencing complications from Sickle Cell Disease (e.g. Acute Chest Syndrome) and in urgent need of an exchange transfusion?** **Yes / No**
- Does the patient require emergency surgery during the next 24 hours?** **Yes / No**
- Are all units incompatible due to inconclusive antibody work-up and meets STAT criteria?** **Yes / No**
  - Previous transfusion? **Yes / No**
  - Previous pregnancy? **Yes / No**
  - Previously identified antibodies? **Yes / No****If Yes, be sure to list in Connect Service Order**

**STAT Scenarios:**

- Emergency surgery with history of antibodies AND current positive antibody screen
- Symptomatic anemia
- Organ transplant with red cell antibodies

**Non-STAT, Routine or ASAP Scenarios:**

- Outpatient transfusion (patient otherwise stable)
- No Orders to Transfuse
- Elective surgery
- Symptoms provided in-lieu of Diagnosis
- Hemoglobin  $\geq 7.0$  g/dl with no symptomatic anemia
- Transfusion not emergent and patient's condition unlikely to change for several hours
- Requests for workup when transfusing antigen negative units prophylactically
- Patient with known AIHA and workup performed within last 7 days
- Patient with known antibodies requiring rare blood when units are not stored on-site.
- Patients with Multiple Myeloma undergoing Daratumumab treatment
- Evaluation for the presence of Drug Induced Hemolytic Anemia
- Cold Agglutinin Titers/Thermal Amplitude/Donath-Landsteiner
- Platelet Antibody Screens/Platelet Crossmatches