**

Shady Grove and White Oak Medical Centers

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| **Blood Bank Team Meeting** **Minutes**  **December 5, 2023** |

**Present:**

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| √ | Mary-Dale Abellano | √ | Bilen Gebresenbet | √ | George Li |
| √ | Kelvin Addo | √ | Isaias Gebreweldi |  | Arlene Mencias |
| √ | Malak Antar | √ | Hojat Goudarzi |  | Tsegaye Negash |
| √ | Lesley Crowder | √ | Natasha Hall | √ | Yvonne Ngwa |
| √ | Bech Ebini | √ | Jessica Jenkins |  | Boris Njeambosay |
|  | Uchama Eni |  | Larissa Kukapa | √ | Rocio Vergara Torres |

**Distribution:** Blood Bank Team

**Meeting commenced:** 0630 and 1600 via TEAMS

| **Item** | **Discussion** | **Action** | **Follow-up** |
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| **CAP Surveys** | Proficiency testing is required by regulatory agencies. There are vendors deemed by CMS for distribution of proficiency testing materials. We use CAP. Essentially, CAP sends specimens to labs across the US. We all test the specimens and submit our results to them. The analyze the data to ensure labs are reporting consistent results.  We are required to ensure all staff members that perform testing perform proficiency testing. We are also required to incorporate testing into our regular workload.  When proficiency testing samples are assigned, staff MUST test during their next shift. Period. We are seeing a lot of staff who are failing to do this. Last minute resulting is causing clerical errors in the submission of data. Please ensure you are performing testing as assigned. We will enforce these deadlines in 2024. | Perform proficiency testing samples during your next scheduled shift when assigned to test. | None |
| **Competency Assessment** | When you receive a competency, please ensure you are completing the top portion with your name and employee ID immediately. Competency assessors should not be signing you off unless your name is on the form.  We divide competency into test systems. Essentially, we have manual tube, manual capture, Echo, fetal screen, and sickle. AABB also requires that we assess any blood product steps/modifications.  We are required to assess 6 elements of competency:   1. Direct observation of patient testing. 2. Recording and reporting of test results. 3. QC, proficiency testing, and PM records. 4. Direct observation of instrument maintenance. 5. Assessment of a blind sample (unknown). 6. Problem solving.   A competency assessor must observe you performing testing and instrument maintenance. I am the only person that can assess the results of your blind sample for annual competency (competency assessors cannot sign off, because they don’t know what the sample is). We compare overall interpretations as well as reaction results for these to ensure we are all grading consistently. | Informational | None |
| **BBREF Workup Questions** | QUESTION: For BBREF workups, does the antigen typing performed by ARC get entered with the T&S?  ANSWER: No, only antigen typing performed in our labs gets entered into the T&S. Ag typing performed by ARC gets entered directly into the BAD file with a comment that it was performed by ARC. This is so we can differentiate testing performed in-house that requires QC and billing from testing performed offsite.  QUESTION: Should PEG and DAT be done before sending out an ARC workup?  ANSWER: Yes, the PEG and DAT are required to interpret the workup and determine if the specimen should be sent out.  QUESTION: If the poly DAT is positive, do we need to do the IgG and C3 DAT before sending to ARC?  ANSWER: Yes, the IgG and C3 DAT need to be resulted to interpret the positive DAT and help determine whether a specimen should be referred to the reference lab.  QUESTION: Are patient labels required on AbID workups?  ANSWER: Yes, at least one page of the workup must contain a full label (the regular size and not an aliquot label). I transfer information to a spreadsheet. The label contains information I need to document. | Informational | None |
| **Transfusion Reaction Questions** | QUESTION: When working up transfusion reactions, if the only symptom is urticaria, do we credit the ABO, Rh, and DAT before submitting to pathology?  ANSWER: Yes, we follow our procedure to complete the workup. All testing must be resulted in Sunquest and crediting of tests not performed must also be completed.  QUESTION: Who enters the pathology interp of a transfusion reaction?  ANSWER: This is done by the group lead or supervisor, because we enter more than just an interp.  NOTE: Also, reminder that the “Inicident Report” box on the form should be left blank. BB staff must remind nursing staff to enter an incident report. Stephanie will match them up and document on the form. Please do not write anything in this box. | Informational | None |
| **Audit Questions** | QUESTION: Are we required to document the product dispense date and time when sending an audit form to the floor?  ANSWER: Yes, we are required to fill out the top portion of the form including patient information and unit number. Most people will fill out the bulk of this at the time of crossmatch and the rest at issue.  QUESTION: Are audits submitted to the group lead or manager?  ANSWER: They go the manager, but it is OK to give to the group lead. The GL will ensure they get to the manager. | Informational | None |