#### TRAINING UPDATE

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

6/6/24 6/30/24

# DESCRIPTION OF PROCEDURE REVISION

**Due Date:** 

# Name of procedure:

**Blood Bank Staff Duties** 

# Description of change(s):

Blood bank daily QC is performed on the night shift.

Dayshift is assigned to verify QC.

- 1. Compare the lot and expiration dates on each bottle to the lot and expiration dates written on the QC form for accuracy.
- 2. Ensure reagents are removed from use and discarded at least 24 hours before expiration.
- 3. New: Dayshift must also verify QC results are correctly documented on the QC form and results are within acceptable range.
- 4. New: If QC is missing or out of range, we STOP patient testing, perform QC/resolve issues, and we must document A) problem B) corrective actions and C) patient impact on the QC sheet.
- 5. New: When assessing patient impact, we must also check to see if an FDA-reportable incident occurred

SGMC staff trade out the O-neg red cells at GEC monthly.

New: BB staff must call GEC to see if they need anti-A, -B, or -D4 before sending red cell units. We will send reagents only with red cells monthly.

#### AHC.BB104 Blood Bank Staff Duties

#### Copy of version 4.0 (approved and current)

Last Approval or

Periodic Review Completed

5/31/2024

Controlled Copy of a Manual ID 20681

**Next Periodic Review Needed On or Before** 

5/31/2026

Location

SGMC & WOMC BB vol 7

Organization Adventist HealthCare

**Effective Date** 

5/31/2024

#### **Approval and Periodic Review Signatures**

Туре	Description	Date	Version	Performed By	Notes
Approval	Lab Director	5/31/2024	4.0	Nicolas Cacciabeve MD	
Approval	BB approval	5/31/2024	4.0	Stephanie Codina	
Periodic review	Medical Director	9/22/2023	3.0	Nicolas Cacciabeve MD	
Periodic review	ВВ	9/21/2023	3,0	Stephanie Codina	
Approval	Lab Director	8/31/2021	3.0	Nicolas Cacciabeve	
Approval	BB approval	8/31/2021	3.0	Stephanie Codina	
Approval	QA approval	8/31/2021	3.0	Leslie Barrett	
Periodic review	Medical Director	12/15/2020	2.0	Nicolas Cacciabeve	
Periodic review	ВВ	11/23/2020	2.0	Stephanie Codina	
Periodic review Captured outside MediaLab	Designated Reviewer	7/16/2018	2.0	Nicolas Cacciabeve	Recorded on 7/18/2019 by Leslie Barrett (104977) when document added to MediaLab
Approval Captured outside MediaLab	Lab Director	8/24/2016	2.0	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
4.0	Approved and Current	Major revision	5/31/2024	5/31/2024	Indefinite
3.0	Retired	Major revision	8/31/2021	9/17/2021	5/31/2024

Retired First version in Document Control 7/18/2019 8/31/2016 9/17/2021

2.0

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

Fort Washington Medical Center

Title: Blood Bank Staff Duties

#### Non-Technical SOP

Title	<b>Blood Bank Staff Duties</b>	
Prepared by	Stephanie Codina	Date: 4/24/2011
Owner	Stephanie Codina	Date: 4/24/2011

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:				

#### TABLE OF CONTENTS

1.	PURPOSE	1
2.	SCOPE	1
3.	RESPONSIBILITY	1
4.	DEFINITIONS	_1
5.	PROCEDURE	2
6.	RELATED DOCUMENTS	4
7.	REFERENCES	 4
8.	REVISION HISTORY	4
9.	ADDENDA AND APPENDICES	<sub>5</sub>

#### 1. PURPOSE

To describe the duties performed daily by blood bank staff members.

#### 2. SCOPE

This procedure applies to daily tasks performed in the blood bank.

# 3. RESPONSIBILITY

All blood bank staff members are required to perform the tasks, duties, and technical procedures outlined in this procedure.

#### 4. **DEFINITIONS**

N/A

SOP ID: AHC.BB104 SOP version # 4

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

Fort Washington Medical Center

Title: Blood Bank Staff Duties

# 5. PROCEDURE

Step	Action
1	All employees are required to:
	A. Read the communication log and complete outstanding tasks.
	B. Prioritize patient testing based on patient location and status.
	a. Patients who are actively bleeding will be the highest priority,
	regardless of location.
	b. Perform STAT work first.
	c. Prioritize specimens in the following order: OR, ED, ICU (including NICU), CCU, L&D, in-patient nursing units, outpatients, preadmission testing
	C. Print a pending test log and clear all unresolved issues before the end of your shift.
	D. Return your reagents to the refrigerator at the end of your shift.
	E. Clean and disinfect your workbench at the end of your shift. This
	includes restocking all bench supplies, wiping down equipment, and cleaning the testing rack.
	F. Refill the paper supplies for the fax machine and printers when necessary.
	G. Make copies of forms if you use the last copy or if you see they are running low.
	H. Receive all reagents and supplies delivered during your shift.
	a. Document receipt in the Product Received Log.
	b. Place a copy of the antigram in the antigram book for screen and panel cells.
	c. Perform reagent crosscheck for applicable reagents and document completion of the QC in the Reagent Receipt QC Log.
	I. Perform all quality control and maintenance tasks that were not completed by the previous shift.
	<ul><li>J. Manage the blood product inventory to minimize wastage.</li><li>a. Utilize short-dated units first.</li><li>b. Work with the blood supplier to ship short dated products to other</li></ul>
	hospitals when applicable.
	K. Assess blood inventory levels and place ad hoc orders when needed to maintain an adequate supply.
	L. Process donor units.

SOP ID: AHC.BB104 SOP version # 4

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

Fort Washington Medical Center

Title: Blood Bank Staff Duties

Step	Action
2	Dayshift is responsible for the following tasks:
	<ul> <li>A. The first person scheduled for the morning shift will receive the shift report from the night tech and document the exchange on the communication log.</li> <li>B. Print a pending test log for both received and unreceived specimens for the date range T-7.</li> <li>a. Check for outstanding tests from previous days and resolve.</li> </ul>
	<ul> <li>b. Call the nursing floor to resolve all unreceived tests. Cancel tests that are no longer needed.</li> <li>c. Review the list of unreceived ABO retype specimens. Determine if an acceptable specimen has been received in another area of the laboratory. Retrieve and test specimens as applicable.</li> <li>C. Re-verify the lot numbers of all current reagents and ensure they are</li> </ul>
	within the valid expiration period. Verify that QC results are within the acceptable range.  D. Discard all reagents that will expire within the next 24 hours. Document the discard in the Product Received Log.  E. Arrange blood inventory by expiration date.  F. Verify blood inventory and edit the standing orders as needed.  G. Perform the blood bank backup per procedure, "BB LIS Reports."  H. Record document temperatures for all temperature-dependent equipment.  I. Change the temperature charts on blood storage equipment weekly.  J. Discard blood banks specimens and donor units involved in transfusion reactions as indicated by procedure, "Sample Specifications for Blood Bank Testing."  K. Perform equipment quality control as needed per procedure.  L. Refresh the red blood cells at GEC as needed. Contact GEC to determine if reagents are needed (anti-A, anti-B, anti-D series 4). Ship new reagents with the blood products.
3	Evening shift is responsible for the following tasks:  A. Shift report  a. Receive the shift report from the dayshift tech and document the communication in the communication logbook.  b. Provide the shift report to the night shift tech and document the communication in the communication logbook.  B. Complete the surgery schedule and fax the surgery schedule to the proper location.  C. Print the Directed/Autologous list and post per procedure, "BB LIS Reports."  D. Discard panels that have been expired for >3 months on a monthly basis.  E. Pull a report of CMV testing and document the results in the patient's BAD files (SGMC only).  F. Perform weekly QC of the plasma thawer.

SOP ID: AHC.BB104 SOP version # 4

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

Fort Washington Medical Center

Title: Blood Bank Staff Duties

Step	Action
4	Night shift is responsible for the following tasks:
	A. Shift report
	a. Receive the shift report from the evening shift tech and document the communication in the communication logbook.
	b. Provide the shift report to the dayshift tech and document the communication in the communication logbook.
	B. Perform reagent quality control.
	C. Perform maintenance and quality control of the Echo/manual Capture.
	D. Rotate the patient specimen racks.
	E. Complete blood bank reports per procedure, "BB LIS Reports."
	F. Equipment quality control (cellwasher, centrifuge, microscope, etc).
5	The lead tech is responsible for the following daily tasks:
	A. Reviewing the BBR8 report.
	B. Reviewing the QA failure report.
	C. Reviewing the merge log daily.
	D. Reviewing and investigating all PI/Variance reports and providing them
	to the manager following investigation.
	E. Reviewing antigen-typing.
	F. Reviewing antibody panel billing.

# 6. RELATED DOCUMENTS

SOP: Blood Bank LIS Reports

Form: Product Received Log (AG.F149) Form: Reagent Receipt QC (AG.F152)

# 7. REFERENCES

None

### 8. REVISION HISTORY

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes WAB613.01, SGAH B613.01		
000	8.2.12	Removed requirement to fax list of pending L&D retypes to L&D. Added manual capture.	SCodina	NCacciabeve
001	8.3.16	Header: add WAH Section 5: Removed references to RhIG and added weekly plasma thawer QC to evening duties. Footer: version # leading zeros dropped due to new EDCS in use as of 10/7/13	SCodina	NCacciabeve
2	8.30.21	Header: Changed WAH to WOMC, added FWMC Section 5 & 6: Updated log titles Footer: Updated prefix to AHC	LBarrett	NCacciabeve

SOP ID: AHC.BB104 SOP version # 4

CONFIDENTIAL: Authorized for internal use only.

Page 4 of 5

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

Fort Washington Medical Center

Title: Blood Bank Staff Duties

Version	Date	Reason for Revision	Revised By	Approved By
3	5.31.24	Added requirement for dayshift to review QC results and ensure they are within acceptable range. Changed order blood inventory to adjust standing order. Added requirement to send reagents to GEC with the blood products as needed.	SCodina	NCacciabeve

#### 9. ADDENDA AND APPENDICES

None