**

Shady Grove and White Oak Medical Centers

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| **Blood Bank Team Meeting** **Minutes**  **November 5, 2024** |

**Present:**

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

**Distribution:** Blood Bank Team

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

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| **ITEM** | **DISCUSSION** | | **ACTION** | | **FOLLOW UP** | |
| **Recognition** | Staff asked for a public forum to recognize others.  Natasha recognized Rocio and Uchama for covering nights when she called out.  Stephanie recognized Uchama and Larissa for covering the open night shifts due to FMLA and Kelvin for covering Uchama’s weekend shifts to allow her to work nights.  Stephanie recognized Malak for covering a callout on evenings. | | Informational | | None | |
| **Ambulance Transfusion** | We have a process for handling blood product bags that were transfused by EMS enroute to the hospital. Please take the MTS.   1. Cerner will prompt a question about ambulance transfusion for any patient that arrives via EMS in critical condition 2. If ED answers that a patient has been transfused,    1. A notice will print to blood bank on the transfuse order printer    2. A EMSTF test will auto order 3. BB staff will attempt to obtain the empty blood bag with segments 4. BB will enter the unit number in the LIS and answer the question of whether the blood bag was received 5. If blood bank is received    1. Place in a ziplock bag    2. Label with patient identifiers and date    3. Place in the refrigerator with the segments; we will hold for 90 days | | Informational | | None | |
| **Massive Transfusion** | Transfusion Committee changed the massive transfusion protocol. We will now issue red cell in plasma in a 1:2 ratio. So, after the first cooler we will issue 6 red cells and only 3 plasma. This change was made after reviewing blood wastage information. Quite a bit of plasma wastage is tracked to MTP activations. Please take the MTS.  Also, reminder that when an MTP is activated, we must document on the Telephone Order Log with MTP. We have had some people lately putting the reason as active bleeding. MTP must be clearly delineated, because we track these separately. | | Informational | | None | |
| **New PTO Plan** | 1. Quest is separating PTO    1. Staff will earn up to 56 hours of health/flex time    2. Vacation will be based on years of service 2. Time will be frontloaded. In January, you will receive:    1. ~15% of your annual vacation    2. 1 health/flex day    3. 1 diversity day 3. You will accrue the remainder of your vacation time from 1/1 to 9/30. You will not accrue vacation in Q4. 4. Borrowing will be limited to 24 hours and you cannot borrow after 9/30 5. You will no longer be paid for unused time if you leave the company 6. Quest will also deduct money from your check if you borrow and cannot pay back before the end of the year | | Informational | | None | |
| **Transfuse Orders** | | When a PROVIDER enters a transfuse order in Cerner, it generates the blood bank order to prepare/issue the unit as well as the nursing task to transfuse the unit.  When BLOOD BANK enters a transfuse order in Sunquest, it only generates the blood bank order.  When we order and set up units for patients with antibodies, we need a new order put in by a qualified provider BEFORE we can issue.  The same applies to transfusions for open heart surgery. We can issue blood in the cooler for open heart surgery. However, after the case is complete, we must have a valid transfuse order from a provider to issue. | | Informational | | None |
| **Neonatal Transfusion and Donor Exposure** | | We make all attempts to minimize donor exposures for neonatal patients. When we prepare the first aliquot for a baby, we designate the unit for that baby. All subsequent aliquots should come from the same unit until the unit expires. Please do not aliquot fresher units if a baby has already received an aliquot from an in-date unit. | | Informational | | None |
| **Returned Units** | | Anytime a spiked unit is returned, we must ask if the patient received any of the unit.  If the patient did not receive even 1 drop of the unit,   1. Return the unit in the computer. 2. BSU the unit as wasted. 3. Place the unit in the biohazard bin and document on the log. 4. Write a PI variance that MUST include the reason for return.   We have had some issues lately with BB staff telling nursing they do not have to return the blood bank. They must return all unused blood products. We have to document that these were incinerated. We must credit the patient if they did not receive the blood product We must document on a PI variance for ALL scenarios. | | Informational | | None |
| **Computer Security** | | Please log into workday to verify that you do not have any learning assignments.   1. Click on Menu 2. Click on Learning 3. Scroll down to “Required for You” 4. Please complete all required assignments.   Everyone should have received a Computer Security assignment. AHC will suspend anyone that does not complete this assignment by December 1. | | Informational | | None |
| **Issuing Blood Via Pneumatic Tube** | | When you issue blood via pneumatic tube, please ensure you are following up with the nursing team if the yellow slip is not returned within 15 minutes and documenting follow up. This is required per regulation and BB procedure. This was questioned during the mock TJC survey at WOMC. | | Informational | | None |
| **Pending Log** | | Please ensure that you are clearing the pending log at the beginning and end of every shift. This includes looking in Lab Inquiry to see if there is a valid specimen in the lab for retype and ABO testing.  We have seen some issues with processing sending us retypes and ABO/Rh specimens when a lavender is sent to the lab. I am working with processing to fix this, but blood bank is equally responsible for checking for specimens. | | Informational | | None |
| **General Cleaning and Upkeep** | | While signing people off of competencies, I noted several issues that are everyone’s responsibility. Here are some examples:   |  |  | | --- | --- | | CW2 cell washer storage wells were broken. If you break these or if you notice they are broken, please notify a supervisor, so they can be reordered. |  | |  | Multiple EXPIRED temperature strips in the drawer. We need to discard all expired reagents and supplies. Notify someone if we have an expired item without a replacement, so it can be fixed. | | Spilled reagent in the Echo. This can contaminate the bottom of the test strips causing the instrument to read reactions improperly. We must clean any spills immediately and remove the Echo from service until complete. |  | |  | We must store forms in designated locations only. We cannot make unofficial binders containing forms per document control regulations. If a form is updated, the “unofficial” book will not be updated which may result is use of a retired form | | | Informational | | None |
| **Employee Experience Survey** | | The Employee Experience Survey opens on November 5 -19. It is very important that all staff complete the survey. Please take a picture or screenprint the completion message when you take it to be entered into a lab drawing for prizes. | | Informational | | None |
| **Apheresis** | | I met with the new manager of dialysis and apheresis.   1. The RNs will complete the blood administration audit form for transfusion during dialysis and apheresis. Please ensure you are sending them with the units. 2. They will notify us 4 hours before an apheresis procedure to thaw the plasma. We don’t want to thaw without their assurance that the procedure will take place to avoid wastage. | | Informational | | None |
| **To Do List** | | 1. Flu shots due 11/11 at noon. AHC will suspend anyone that misses this deadline. Please send a copy of your flu documentation to Stephanie ASAP if you have not done so already. 2. Competencies are due 11/15. Most people are already complete. Please work to ensure you complete your competency by the deadline. 3. There are two Empower assignments that need to be completed in November.    1. Slips and Trips due 11/22    2. EHS Chemical Spill response due 11/30 4. Workday assignments due 12/1 5. MTS due 12/31 6. Sign up for 2025 holidays | | Informational | | All staff |