

## TRAINING UPDATE

<b>Lab Location:</b>	FWMC, SGMC, WOMC	<b>Date Implemented:</b>	1/13/2026
<b>Department:</b>	Blood Bank	<b>Due Date:</b>	1/31/2026

### DESCRIPTION OF PROCEDURE REVISION

<b>Name of procedure:</b>
Confirmation of Patient's Blood Type (ABO Recheck)
<b>Description of change(s):</b>
Blood bank will no longer accept historical ABO results from outside locations (BHISD). CAP TRM.40575 has been updated and no longer accepts ABO confirmations tested outside of Adventist Healthcare.  This change is effective immediately.

## SBAR Historical ABO Typing and ABO Confirmation

<b>S</b>	<b>Situation</b>	Effective immediately, the blood bank will no longer accept laboratory reports from outside locations in place of the ABO confirmation specimen.
<b>B</b>	<b>Background</b>	Regulatory agencies require blood bank to test two separate specimens for ABO/Rh before issuing type specific blood products. Blood bank has been accepting ABO/Rh testing performed at non-AHC locations when a laboratory report meeting defined criteria was submitted. However, the regulatory standard for ABO verification was recently updated no longer allows this practice.
<b>A</b>	<b>Assessment</b>	Historical ABO/Rh testing can only be used for ABO confirmation if the testing was performed by laboratory personnel at an Adventist Healthcare site and entered directly into the laboratory information system (Sunquest). Blood bank staff members will continue to check for ABO/Rh typing performed at FWMC, SGMC, WOMC, and GEC prior to requesting an ABO confirmation specimen.
<b>R</b>	<b>Recommendation</b>	All patients will require that a separate specimen be collected when the patient does not have a historical ABO type in the laboratory information system. Submission of laboratory reports from outside locations will not longer be accepted.
<b>Policy Revised 1/2026</b>		001-18-201 Blood Administration Policy
<b>Questions</b>		<p>Please contact Stephanie Codina with questions.</p> <p><a href="mailto:scodina@adventisthealthcare.com">scodina@adventisthealthcare.com</a></p> <p>SGMC: 240-826-6689</p> <p>WOMC: 240-637-6015</p>

## AHC.BB18 Confirmation of Patient's Blood Type (ABO Recheck)



Copy of version 7.0 (ready for lab director approval)

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Organization Adventist HealthCare

### Approval and Periodic Review Signatures

Type	Description	Date	Version	Performed By	Notes
Approval	BB approval	1/13/2026	7.0	Stephanie Codina	
Approval	Lab Director	7/11/2025	6.0	 Senda Beltaifa MD	
Periodic review	Medical Director	8/31/2023	6.0	 Nicolas Cacciabeve	
Periodic review	BB	8/31/2023	6.0	Stephanie Codina	
Approval	Lab Director	8/17/2021	6.0	Nicolas Cacciabeve	
Approval	BB approval	8/17/2021	6.0	Stephanie Codina	
Approval	QA approval	8/16/2021	6.0	Leslie Barrett	
Approval	Lab Director	6/25/2021	5.0	Nicolas Cacciabeve	
Approval	BB approval	6/25/2021	5.0	Stephanie Codina	
Approval	QA approval	6/24/2021	5.0	Leslie Barrett	
Periodic review	Medical Director	7/1/2019	4.0	Nicolas Cacciabeve	
Periodic review	BB	6/28/2019	4.0	Stephanie Codina	
Approval Captured outside MediaLab	Lab Director	9/1/2017	4.0	Nicolas Cacciabeve	Recorded on 6/21/2019 by Leslie Barrett (104977) when document added to Document Control
Periodic review Captured outside MediaLab	Designated Reviewer	9/1/2017	4.0	Nicolas Cacciabeve	Recorded on 6/21/2019 by Leslie Barrett (104977) when document added to Document Control

Approvals and periodic reviews that occurred before this document was added to Document Control may not be listed.

### Prior History

Updated prefix 8/18/21

### Version History

Version	Status	Type	Date Added	Date Effective	Date Retired
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6.0	Approved and Current	Major revision	8/16/2021	8/17/2021	Indefinite
5.0	Retired	Major revision	6/24/2021	6/25/2021	8/17/2021
4.0	Retired	First version in Document Control	6/21/2019	9/28/2017	6/25/2021

Retired or Not Yet Effective

Adventist HealthCare  
 Site: Shady Grove Medical Center, White Oak Medical Center,  
 Fort Washington Medical Center

Title: Confirmation of Patient's Blood Type  
 (ABO Recheck)

## Non-technical SOP

Title	Confirmation of Patient's Blood Type (ABO Recheck)	
Prepared by	Maria Hall	Date: 8/20/2009
Owner	Stephanie Codina	Date: 4/12/2010

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:

**TABLE OF CONTENTS**

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

**1. PURPOSE**

Confirmation of blood group and type is utilized to provide for patient safety by detecting clerical or technical errors in patient blood typing prior to transfusion.

**2. SCOPE**

The ABO and Rh type will be confirmed through the use a separate valid ABO/Rh result. This valid ABO/Rh will be a second specimen drawn by a different person or drawn at a different time or a historical record of ABO/Rh displayed in the laboratory information system. Type specific blood products will not be issued until ABO confirmation testing is complete.

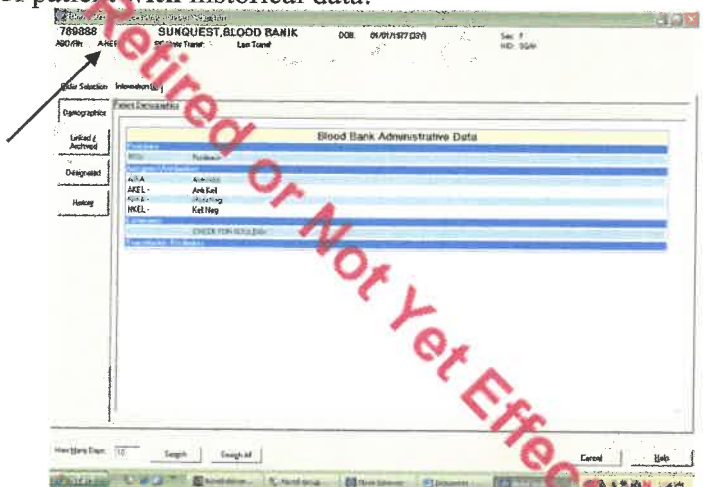
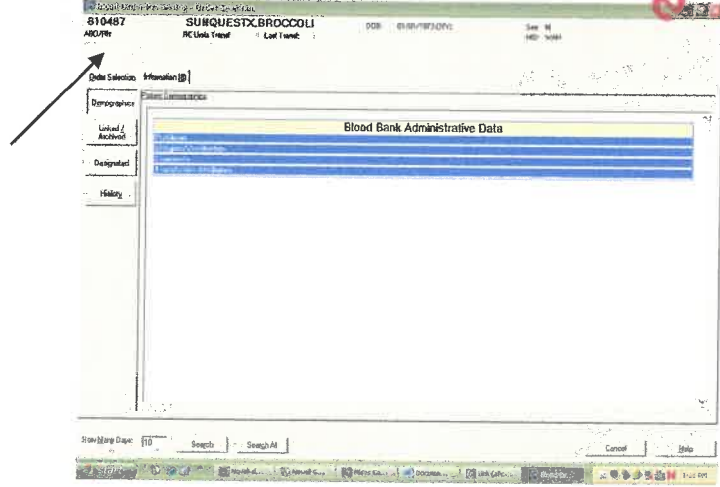
**3. RESPONSIBILITY**

All blood bank staff must demonstrate competency for recognizing which patient specimens require confirmatory blood typing.

#### 4. DEFINITIONS

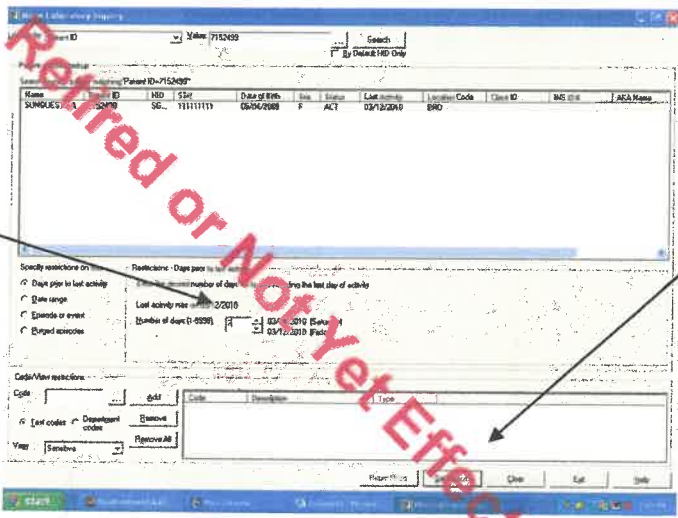
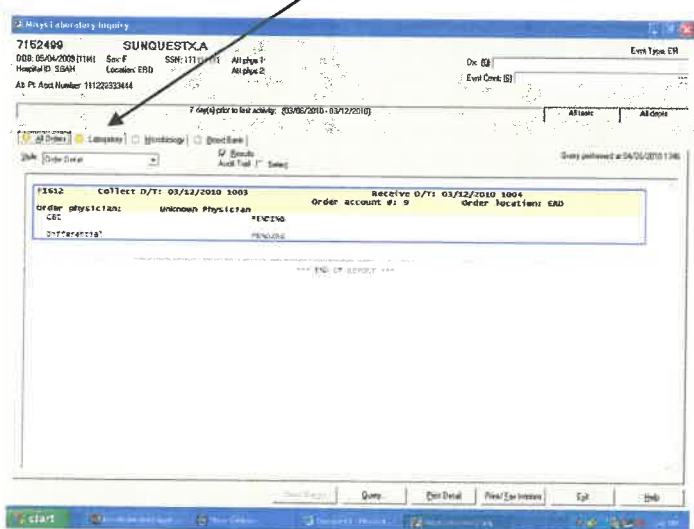
- ABO Retype/ABO Confirmation: A sample drawn to confirm ABO and Rh typing on a patient who has no previous blood bank history.
- Historical ABO: An ABO and Rh result entered by laboratory personnel into the Adventist Healthcare laboratory information system.

#### 5. PROCEDURE

Step	Action
1	<p>Immediately upon receipt of a T&amp;S specimen, perform a history check per procedure, "Patient History Check." An ABO retype is required for any patient who does not have a historical blood type on file.</p> <p>Example of patient <b>with</b> historical data:</p>  <p>Example of patient <b>without</b> historical data:</p>  <p>Blood bank will order an ABO retype specimen on all patients who do not have a historical ABO on file.</p>

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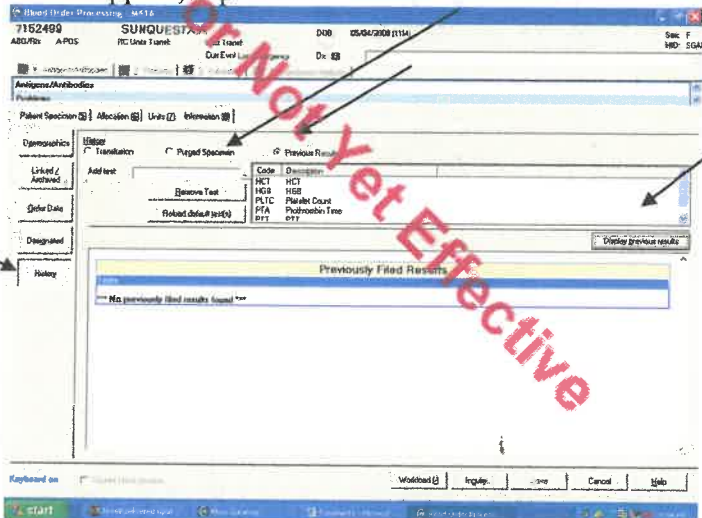
Site: Shady Grove Medical Center, White Oak Medical Center,  
Fort Washington Medical CenterTitle: Confirmation of Patient's Blood Type  
(ABO Recheck)

Step	Action
2	<p>When a patient needs ABO retype/confirmation testing, first check to see if the patient has an acceptable specimen in the laboratory.</p> <p><b>METHOD 1:</b></p> <ol style="list-style-type: none"> <li>Access Sunquest function, "Laboratory Inquiry."</li> <li>In the "Lookup by" prompt, select "Patient ID" from the dropdown menu.</li> <li>In the "Value" prompt, type the patient's medical record number and click on the "Search" button.</li> <li>Highlight the correct patient from the list of patients that appears.</li> <li>In the "Number of days (1-9999)" prompt, type "7" and click on the "Get Results" box.</li> </ol>  <ol style="list-style-type: none"> <li>Click on the "Laboratory" tab. A list of all of the patient's laboratory work performed in Core Lab will appear. Look for a CBC order.</li> </ol> 



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Site: Shady Grove Medical Center, White Oak Medical Center,  
Fort Washington Medical CenterTitle: Confirmation of Patient's Blood Type  
(ABO Recheck)

Step	Action
2 Cont	<p><b>METHOD 2:</b></p> <ol style="list-style-type: none"> <li>Branch to here from the "Patient History Check" or             <ol style="list-style-type: none"> <li>Access Sunquest function, "Blood Order Processing."</li> <li>In the "Lookup by" prompt, select "Patient ID" from the dropdown menu.</li> <li>In the "Value" prompt, type the patient's medical record number and click on the "Search" button.</li> </ol> </li> <li>Click on the "Order Selection" tab.</li> <li>Select the correct specimen from the list if more than one appears.</li> <li>Click on the "Information" tab.</li> </ol> <p>Note: The data will not appear if you click on the information tab prior to selecting a specimen.</p> <ol style="list-style-type: none"> <li>Click on the "History" button.</li> <li>Click on the "Previous Results" prompt.</li> <li>Select any hematology test that uses an EDTA specimen from the list by clicking on the test.</li> <li>Click on the "Display Previous Results" button.</li> <li>The result will appear, if present.</li> </ol> 
3	<p>If a previous result exists within 7 days, verify the date and time of the specimen.</p> <ol style="list-style-type: none"> <li>If the specimen was collected at a different time than the T&amp;S specimen, it may be used for ABO Retype testing.</li> <li>If no specimen exists or if the specimen was collected at the same time as the T&amp;S specimen, a new specimen must be requested.</li> </ol>



## ABO Confirmation

This section only applies:

- A. If a new specimen will be collected or if a hematology specimen exists for patient testing.
- B. If the patient is in-house. It is not necessary to order ABO confirmation testing on outpatients.

Step	Action
1	<p>Order the ABO Retype/Confirmation testing in Sunquest.</p> <ol style="list-style-type: none"> <li>A. Access Sunquest function, "Order Entry."</li> <li>B. At the "Lookup By" prompt, click on the dropdown menu and select "Patient ID."</li> <li>C. At the "Value" prompt, type the patient's medical record number and click on the "Search" button.</li> <li>D. Click on the patient for whom you are ordering testing to highlight then press the "Select" button.</li> <li>E. If the patient has an acceptable specimen in the laboratory,               <ol style="list-style-type: none"> <li>a. At the "Collect Date" prompt, type in the date on which the specimen was collected and press tab.</li> <li>b. At the "Collect Time" prompt, type in the time at which the specimen was collected and press tab.</li> <li>c. At the "Received Date" prompt, press the tab key to default the current date.</li> <li>d. At the "Received Time" prompt, press the tab key to default the current time.</li> </ol> </li> <li>F. If the patient needs a specimen collected for testing,               <ol style="list-style-type: none"> <li>a. At the "Collect Date" prompt, type "T" for today and press tab.</li> <li>b. At the "Collect Time" prompt, type "N" for now and press tab.</li> </ol> </li> <li>G. At the "Ordering Physician" prompt, type in the number of the patient's physician. This is generally listed at the top of the screen. Alternatively, you can click on the ellipse and search for physician by name. Press tab.</li> <li>H. If the patient already has an acceptable specimen,               <ol style="list-style-type: none"> <li>a. At the "Phlebotomist Code" prompt, type either "850" for nurse collect, "870" for MD collect, or the phlebotomist's ID number for phlebotomist collect.</li> <li>b. At the "Workload Code" prompt, type "RNC" for nurse collect, "MDC" for MD collect, or "VP" for phlebotomist venipuncture.</li> </ol> </li> <li>I. At the "Order Code" prompt, type "RTYP" and tab.</li> <li>J. Click on the "Save" button.</li> <li>K. The retype will generate a new accession and a label will print.</li> </ol>

Step	Action
2	<p>A. For phlebotomy collect areas, the ABO confirmation testing will automatically show on the phlebotomist collection list.</p> <ol style="list-style-type: none"> <li>No action is necessary if the ABO confirmation testing is routine.</li> <li>Call the phlebotomy department and request a STAT draw if blood transfusion is pending.</li> </ol> <p>B. For nurse collect areas (L&amp;D, ED, OR), notify the nurse taking care of the patient of the need for ABO confirmation testing via telephone call or fax.</p> <p>C. ABO confirmation specimens must be labeled with the following:</p> <ol style="list-style-type: none"> <li>Patient's last and first name</li> <li>Patient's medical record number</li> <li>Date and time of collection</li> <li>Initials or ID of person collecting specimen</li> <li>Blood bank armband number and handwritten labels are NOT needed</li> </ol>
3	<p>ABO retype specimens will be delivered to blood bank upon receipt. Blood bank staff will receive the specimens in Sunquest per procedure and add a collection fee if applicable.</p> <p>A. A collection fee will be added to any specimen that phlebotomy staff drew specifically for ABO retype testing.</p> <ol style="list-style-type: none"> <li>Billing will NOT be added to specimens that nursing staff collected.</li> <li>Billing will NOT be added for any specimen that was previously drawn and obtained from the laboratory.</li> </ol> <p>B. Collection fees will be added in Order Entry using the following mnemonics.</p> <ol style="list-style-type: none"> <li>LVC = venous collection performed by lab staff</li> <li>LCC = capillary collection performed by lab staff</li> </ol>
4	<p>Blood bank staff will test the specimen per procedures, "ABO Group (Tube Testing)" and "Rh Type (Tube Method)."</p> <p>A. Refer to procedure, "ABO/Rh Discrepancies with Historical Data" if the ABO or Rh of the new specimen does not match that of the original.</p> <p>B. If a discrepancy exists between the forward and reverse type that was present in the original specimen, you do NOT need to complete the ABO discrepancy workup on the second specimen provided the immediate spin results of the second specimen match those of the original specimen exactly.</p>
5	ABO confirmation testing should take place as soon as workload permits.

**Same Tube ABO/Rh Confirmation**

Only group O red cells and group AB plasma products will be issued on a patient without a minimum of 2 ABO/Rh results on file. In emergency situations, a pathologist can override this requirement. However, the ABO/Rh of the primary tube **must** be tested at least twice to confirm the ABO type.

Step	Action
1	Access the patient's T&S specimen in Sunquest Blood Order Processing.
2	In the "Add Spec Test" field, type "X" or ";ARC" to add the ABO/Rh Recheck.
3	Press the home key to access the grid.
4	Test the ABO/Rh per procedure, "ABO Group (Tube Testing)."
5	Enter the results in the grid. A. Enter the result of the Anti-A tube in the "A" field. B. Enter the result of the Anti-B tube in the "B" field. C. Enter "9" for "not tested" in the "AB" field. D. Enter the result of the Anti-D tube in the "D" field.
6	Interpret the test. A. Interpret the ABO group. a. Type "O" for group O. b. Type "A" for group A. c. Type "B" for group B. d. Type "C" for group AB. B. Interpret the Rh type. a. Type "P" for Rh-positive. b. Type "N" for Rh-negative.
7	The ABO/Rh tests performed on the primary T&S tube must match EXACTLY. A. Any discrepancies must be addressed immediately. B. Notify a supervisor or administrator on-call. C. DO NOT issue type specific blood products.

**6. RELATED DOCUMENTS**

SOP: ABO/Rh Testing (Manual Tube)

SOP: ABO/Rh Discrepancies with Historical Data

SOP: Order Entry: Receiving Orders in the GUI System

**7. REFERENCES**

N/A

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Site: Shady Grove Medical Center, White Oak Medical Center,  
Fort Washington Medical CenterTitle: Confirmation of Patient's Blood Type  
(ABO Recheck)**8. REVISION HISTORY**

Version	Date	Reason for Revision	Revised By	Approved By
		Supersedes SWB.009.000		
000	4/12/2010	Updated owner. Section 2: revised to include historical record or result from an approved laboratory Section 5: computer entry revised to reflect LIS upgrade, added LIS documentation for historical ABO	S. Codina	N. Cacciabeve
001	10/5/2010	Section 5: Added comment to move ABO/Rh data in archive or from sister hospital to BB historical ABO data; Removed requirement to order ABO confirmation testing on outpatients; Clarified process for ordering retypes for phlebotomy to collect; Added allowance that ABO/Rh results on autologous units may be used for Historical ABO; Changed data entry of historical ABO; Added instructions for same tube ABO/Rh confirmation in emergency situations.	S Codina	Dr. Cacciabeve
002	10.17.16	Header: add WAH Footer: version # leading zeros dropped due to new EDCS in use as of 10/7/13	L Barrett	N Cacciabeve
3	8.30.17	Section 5: Added requirement to bill laboratory collections for retypes	S Codina	N Cacciabeve
4	6/24/21	Header: Changed WAH to WOMC Section 5: Removed references to the ED hold rack. Removed requirement to send nursing a form for ABO retype collection.	SCodina	NCacciabeve
5	8.16.21	Header: Added FWMC Footer: Updated prefix to AHC	LBarrett	NCacciabeve
6	1/13/26	Removed references to the historical ABO. CAP TRM.40575 has been updated and no longer allows retypes from outside AHC.	SCodina	SBeltaifa

**9. ADDENDA AND APPENDICES**

None