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EMERGENCY RELEASE OF RED BLOOD CELLS – SAH, SCH, SEH, SFH

☐ St. Joseph Medical Center Tacoma, WA ☒ St. Clare Hospital Lakewood, WA ☒ St. Elizabeth Hospital Enumclaw, WA
☒ St. Francis Hospital Federal Way, WA ☒ St. Anthony Hospital Gig Harbor, WA ☐ Highline Medical Center Burien, WA   ☐ PSC

PURPOSE

To define the policy for issuing uncrossmatched Red Blood Cell products (RBC) in emergency situations at SAH, SCH, SEH, SFH.

POLICY

Do not delay the issue of emergency O Neg or O Pos RBCs for any reason. The provider who requests emergency release has already made the determination based on clinical evidence that the patient urgently needs to be transfused. Inappropriate delays greatly increase the risk of patient mortality. Our first priority is to take care of the patient.

When the call to the blood bank occurs, request the gender and approximate age of the patient:

Males ≥ 16 and Females ≥ 50 are to be issued O Pos RBCs

The only patients to receive O Neg RBCs are:
- Females under the age of 50 years
- Males under the age of 16 years
- It is ok to give O Pos RBC to patients of any age if we completely run out of O Neg.

BACKGROUND

When blood is urgently needed, whether for an adult or a neonate, the physician has made the decision that the risk of delaying transfusion outweighs the risk of transfusing uncrossmatched blood, emergency released uncrossmatched blood is provided.

The patient's record must contain a signed statement of the requesting physician indicating that the clinical situation was sufficiently urgent to require release of uncrossmatched blood. The "Emergency Release Form" is available for this purpose.

RELATED DOCUMENTS

M-W-TS-0105	Patient History Check
M-W-TS-0311A	Emergency Release of Blood Products – Unknown Patient
M-W-TS-0311	Emergency Release of Blood Products – Known Patient
M-W-TS-0346	Blood Bank Specimen Transport to SJMC
R-PO-TS-0300	Blood Component Selection Policy
R-W-TS-0317	Safe-T-Vue Temperature Indicator Use
M-W-TS-0319	Downtime Shipping, Receiving, and Issuing at Remote Sites
R-F-TS-1036	Downtime Issue Log
R-W-TS-0403	Packing Blood Components for Transport
R-F-TS-1020	Emergency Blood Transport Log
M-W-TS-0304	Blood Bank Transport Containers

SUPPLIES / EQUIPMENT

- Emergency O Negative or O Positive RBC units
- Emergency Release Form
- Epic Downtime Inpatient Blood Administration form
- Uncrossmatched Blood Stickers
- Temperature sensors for blood units
- Emergency Blood Transport Log
- Wet Ice & Cooler (if applicable)

CRITICALLY URGENT PATIENTS

1. Talk directly to the provider (MD, PA, or RN) to determine the severity of the bleed. Be aware that other reasons exist for issuing emergency release blood such as cardiac problems.

2. Ask the following questions. Take note of the answers

   - Is the patient hemorrhaging? If not hemorrhaging, what is the situation?
   - How many units needed?
   - Has the patient been registered?
   - Patient name? If name is unknown, what is the pseudoname?
   - DOB?
   - MRN? If not registered yet, is there a pseudonumber?
   - Has a Type & Screen specimen been collected?
   - A Lab Assistant may be dispatched to draw the patient's blood for a Type & Screen.

3. The level of urgency can be determined from the initial phone call from the clinical unit or from the runner.
   - Listen to the stress in the speaker's voice.
   - **If the call is for blood for a Newborn, consider this as requiring the utmost urgency**.
   - Ask them how badly the patient is bleeding if they don't volunteer the information..
   - Phrases like "bleeding out all over the floor", "blood squirting out all over the room", etc., are an indication of the dire straits the patient is in and <u>must</u> be taken at face value.

4. Obtain patient identification and location.

5. Determine whether the patient's record is in Safetrace (i.e., the patient is "Known"). If not already in Safetrace, take steps to make the patient known.

6. If needed ask another tech to help you with the emergency process

Newborn Scenario	
Irradiation/ABY Check	Not applicable for baby
Pickup Slip	Get Mom's name/MRN if baby not yet registered
Emergency Release Form	Write Mom's Name/MRN if baby not yet registered
Issuing	• If baby not registered, issue on Downtime Form • If baby is registered, use Emergency Release - Known

Patient History Check	Check **Mom's history** <u>for Aby</u>. (Do NOT DELAY blood to baby) • Notify SJTS and Baby's Doctor ASAP of any Aby History (except anti-D)

7. Check the Patient History in the **Patient-at-a-Glance bar. (Note:** Check of history on Newborn is not necessary. Check **Mom's history** <u>for Aby</u>. (Do NOT DELAY blood to baby) Notify SJTS and Baby's Doctor ASAP of any Aby History (except anti-D))

- Look first for **Special Needs (S button).**
    - If the patient has an **<u>IRR special need</u>**, **<u>give irradiated</u>** type O blood whenever possible.
- Look next for antibodies (**ABY button**)**.**
    - If the Patient History Check reveals the patient has a **<u>positive antibody history</u>**, call SJMC Transfusion Service IMMEDIATELY and tell them the situation, patient name, and history **<u>before proceeding</u>**. Follow any instructions that the SJMC tech provides.

8. If the urgency is so great that the runner does not have a patient sticker when arriving at the blood bank, have them write down the patient name or trauma name on a piece of paper. They may also call the clinical unit for that information.

9. Retrieve the requested number of RBCs from the storage unit.

10. Place a patient label (or write the patient's info) on the Emergency Release form.
    - Ensure the unit number from <u>each</u> RBC unit is on the form.
    - Ensure the ABO Group/Rh Type is on the form.
    - Sign and date/time the document.
    - Make a copy of the form to keep in the lab.

ISSUING THE BLOOD (3 options)

In the Patient/Order Module perform emergency issue of blood products – RBCs, Thawed Plasma, Platelets and Cryo can be emergency released.

NOTE*: Whenever possible, make the patient "known" by bringing in from EPIC across the ADT Holding interface.*

<u>**NOTE:**</u> **Units CANNOT be reserved or crossmatched** to the patient in order to use the Emergency Release process in SafetraceTX

A. For "Known" Patients *meaning patient has been registered in EPIC and info has crossed the interface into SafeTrace Tx - (1st choice)*

1. From the **Patient/Order Module**, select **Product > Emergency Issue > Known**. The Emergency Product Issue- Known Patient window opens.

2. Click the **Patient button** on the "menu" found on the right side of the screen. The **Select Emergency Patient** window opens.

3. Enter the **patient's MRN** (Medical Record Number) and click **Query**. The visits associated with the patient display in the Available Visits for Patients grid.

4. If the correct visit is in the grid, double-click the visit row. The Select Emergency Patient window closes.

5. If the desired visit is **not** displayed, click the **New Visit** button to view additional visits available for the patient.
    - The New Patient Visit window opens
    - Click the **ADT Visit** Button. The **ADT holding** window opens
    - **Select the visit with the current admission date** from the ADT grid and click OK
    - The ADT Visit Holding window closes and the visit information will populate the New Patient file.
    - **Click OK** to close the New Patient Visit Window.

6. The patient information populates the **Emergency Product Issue – Known Patient** window.

7. The Patient At-A-Glance Bar at the top of the screen activates and contains information on the patient status. Perform a **Patient History check.** Watch for the presence of antibodies and special needs regarding irradiation. Contact SJMC for guidance, if needed

8. Enter your hospital in the Issue Location box, example: SAH. In the "Released To" field, type in your tech ID. Then patient location, then transporter's initials. Example: A25/8C4/JA

Note: The Issue date and time is defaulted to the current date and time

9. Barcode scan the component information including the unit number and the product code.

10. Visually inspect the component. If OK, click to check the Visual Inspection OK check box.

Note: Enter the cooler number in the Container ID if the products are being issued in a cooler.

11. Click **Accept** to add the component information to the **Products to Issue Grid**.

12. Repeat steps 8-10 for additional units. Click **OK** to save and print P-Tags and close the window.

13. Informational message, "You have successfully issued products(s)!" displays.
    - Click OK to close the window.
    - The status of the component updates to 'Issued.'
    - The **I**ssue button activates (turns red) on the Patient-At-A-Glance Bar.

14. An order is automatically generated in the system for the component issued.

15. Adhere P-Tag(s) to the reverse side of the unit(s) and initial the tag.

16. Complete the Emergency Release Form with available patient information and unit # stickers
    - Check the box on the form appropriate to the situation
    - Record the unit numbers and ABORH of the unit. (Stickers from the reverse of the unit may be used).
    - Write patient identifiers in the lower right-hand corner, or use a patient hospital label. Include patient name, DOB, and MRN (if available).
    - Sign and put date and time on the form

17. Attach temperature indicators to the RBC units and pack the units on ice if sending to clinical unit in a cooler.

18. If issuing blood in a cooler, complete the Emergency Blood Transport Log
    - Fill out the form
    - Make copies of the Forms used.
    - **If physician has not already signed the form, send the original with the blood for signature**.
    - Keep the copies in the blood bank

- Inform the transporter that the "For Hospital Department Use Only" section should be filled out and to return the form when complete.
- Obtain the completed form from the nursing unit for storage in the lab.

19. The Physician-signed Emergency Release Form is sent to SJMC TS for retention. These are scanned into the Patient's file in EPIC. AABB & FDA retention requirement for these forms is 10 years.

B.   For "Unknown" Patients _(defined as a patient that does not exist in SafetraceTX)._ - **(2nd choice)**

NOTE_: If possible, make the patient "known" by bringing in from EPIC across the ADT Holding interface and follow 1st Choice above. If patient cannot be made "known", use this choice or the Downtime process that follows_

1. From the **Patient/Order Module**, select **Product > Emergency Issue > Unknown**. The Emergency Product Issue- Unknown Patient window opens.

2. Manually enter the trauma name or alias from the pickup slip or from verbal information given over the phone.

3. Enter the gender, date of birth, and MRN as they read from the pickup slip or from information given over the phone.

4. Enter required information including Service Provider:
   - Use SJMC as provider when issuing RBCs
   - Use your facility – example SEH – for plasma products

5. Issue Location is your facility

6. In the "Released To" field:
   - Type in your tech ID.
   - Then patient location (room #)
   - Then transporter's initials.
   - Example: A25/8C4/JA

   Note: The Issue date and time is defaulted to the current date and time. These values can be modified if necessary.

7. Barcode scan the unit number and the product code.

8. Visually inspect the component. If OK, click to check the Visual Inspection OK check box.

   Note: Enter the cooler number in the Container ID box if the products are being issued in a cooler.

9. Click **Accept** to add the component information to the **Products to Issue Grid**.

10. Repeat steps 7-9 for additional units.

11. Click **OK** to save and print P-Tags and close the window.

12. Informational message, "You have successfully issued products(s)!" displays.
    o Click OK to close the window.
    o The status of the component updates to 'Issued.'
    o The **I**ssue button activates (turns red) on the Patient-At-A-Glance Bar.

13. An order is automatically generated in the system for the component issued.

14. Adhere P-Tag(s) to the reverse side of the unit(s) and initial it.
    NOTE: Later, once the patient's identity is clear, the patient profile can be updated with the correct demographics. Contact SJMC TS to request that this be done.

15. Complete the Emergency Release Form with available patient information and unit # stickers
    - Check the box on the form appropriate to the situation
    - Record the unit numbers and ABORH of the unit. (Stickers from the reverse of the unit may be used).
    - Write patient identifiers in the lower right-hand corner, or use a patient hospital label. Include patient name, DOB, and MRN (if available).
    - Sign and put date and time on the form

16. Attach temperature indicators to the RBC units and pack the units on ice if sending to clinical unit in a cooler.

17. If issuing blood in a cooler, complete the Emergency Blood Transport Log
    - Fill out the form
    - Make copies of the Forms used.
    - **If physician has not already signed the form, send the original with the blood for signature**.
    - Keep the copies in the blood bank
    - Inform the transporter that the "For Hospital Department Use Only" section should be filled out and to return the form when complete.
    - Obtain the completed form from the nursing unit for storage in the lab.

18. The Physician-signed Emergency Release Form is sent to SJMC TS for retention. These are scanned into the Patient's file in EPIC. AABB & FDA retention requirement for these forms is 10 years.

C. Use Downtime paper method (3rd choice) - longest time to perform

1. Obtain "Downtime Issue Log"

2. Record Patient name and MRN

3. Record Product code

4. Place unit number sticker on form

5. Expiration date of unit

6. Issue to:
    Date/Time/Tech

7. Visual OK? Y or N

8. Fill out and place downtime patient label sticker on the reverse side of the unit.

9. Complete the Emergency Release Form with available patient information and unit # stickers
    - Check the box on the form appropriate to the situation
    - Record the unit numbers and ABORH of the unit. (Stickers from the reverse of the unit may be used).
    - Write the patient identifiers in the lower right-hand corner, or use a patient hospital label. Include patient name, DOB, and MRN (if available).
    - Sign and put date and time on the form

10. Make a copy of the Emergency Release form and the Emergency Transport Log
    - If physician has not already signed the form, transport it with the blood for signature.
    - Leave the originals with the units in the cooler
    - Keep the copies in the blood bank
    - The original (or copy) of the physician-signed emergency release form must be sent to SJMC. We are required by AABB & FDA to keep these forms for 10 years.

11. Attach temperature indicators to the RBC units and pack the units on ice if using a cooler to send them to the clinical unit.

12. If issuing blood in a cooler, complete the Emergency Blood Transport Log
    - Fill out the form
    - Make copies of the Forms used.
    - **If physician has not already signed the form, send the original with the blood for signature**.
    - Keep the copies in the blood bank
    - Inform the transporter that the "For Hospital Department Use Only" section should be filled out and to return the form when complete.
    - Obtain the completed form from the nursing unit for storage in the lab.

13. The Physician-signed Emergency Release Form is sent to SJMC TS for retention. These are scanned into the Patient's file in EPIC. AABB & FDA retention requirement for these forms is 10 years.

NOTES:

1. Request that a Type & Screen blood bank specimen be drawn immediately, if not already done.

2. If at any time you need assistance please call SJMC Blood Bank but do not delay the release of blood.

3. Make every effort to emergency issue the blood in SafeTrace Tx PRIOR to giving the blood to a runner or taking the blood to the clinical unit yourself.

4. If the urgency of the situation requires that you must take blood to the clinical unit:
   - Either photo copy both sides of the unit– or –
   - Remove a unit # sticker from the back of the unit and place it on a downtime form.
   - Return to the lab immediately to issue the blood properly in SafeTrace Tx - noting the date and time it left the lab as the time of issue.

5. In an emergency, the Epic blood pick-up slip may not be available.   In its absence a patient sticker, or handwritten patient label may be used.

SWITCHING TO Type-Specific Uncrossmatched Units

In rare circumstances, in order to conserve Type-O Units, SJMC may direct the issue of type specific uncrossmatched blood while they are performing an antibody identification or they may designate an antigen-neg type specific unit without waiting for AHG crossmatch.

SJMC must determine a valid blood type and remote-print PTag labels for these type-specific units.   SJMC will call to notify when this switch is appropriate.
- SAH, SCH, SEH, and SFH techs will never initiate this change without direction.

The type-specific process is as follows:
- SJMC will complete ABORH testing and enter the results into SafeTrace Tx
- SJMC will reserve the blood to the patient in SafeTrace Tx and remote print a P-Tag to the correct hospital
- SAH, SCH, SEH, or SFH tech will check the Patient-at-a-Glance bar at the top of the issue screen to be certain the patient's blood type is displayed – and that it matches the blood type on the RBCs.
  - Take the P-Tag to the blood bank refrigerator and locate the correct unit.
  - Carefully compare the unit to the P-Tag. If everything matches, the unit is ready to issue.

- Because this is Uncrossmatched blood, the Emergency Release form is still **required** to be signed by the physician, authorizing the issue of this product.