



Current Status: *Active*

PolicyStat ID: 3983374



**Origination:** 12/2012  
**Effective:** 09/2017  
**Last Approved:** 09/2017  
**Last Revised:** 09/2017  
**Next Review:** 09/2019  
**Owner:** *Tim Malone: Manager, Transfusion Services*  
**Policy Area:** *Lab / Transfusion Services*  
**References:** *CAP Gen.40493*  
**Applicability:** *St. Francis Hospital  
 St. Anthony Hospital  
 St. Clare Hospital  
 St. Elizabeth Hospital  
 St. Joseph Medical Center*

## Labeling & Receiving Type & Screen Specimens, M-W-TS-0100-11

### PURPOSE

To provide instructions for accurately labeling pre-transfusion specimens from patients who have a Type & Screen order. These patients have the potential to receive an RBC transfusion.

### BACKGROUND

Most ABO-incompatible transfusions result not from laboratory testing errors but from mistakes in patient identification. This includes (1) either sample collection or labeling errors that result in the wrong blood collected in the tube or (2) misidentification of the patient at the time of transfusion. The incidence of wrong blood in tube is reported to be approximately one per 1000 samples – and – in one of every 12,300 transfusions the recipient receives a unit not intended for or not properly selected for him/her.

It is important to remember that wrong blood collected in the tube has the potential to cause a potentially fatal hemolytic transfusion reaction. A significant step for preventing mistransfusion is to obtain a properly labeled tube of blood from the correct patient.

Note: The identity of the collector of pre-transfusion specimens is tracked at the individual level by the completion of the Collection Task in the EMR at the time of draw. When a manual process is used, legible initials are written on the specimen tube label, which can be traced to the collector.

### POLICY

Proper patient identification is key to ensuring that the correct patient is collected for the Type & Screen test and will require two people to complete. During the collection process, both the specimen collector and an independent, qualified staff member acting as a verifier will check patient ID. See information under **Specimen Collection** header.

### RELATED DOCUMENTS

M-PO-TS-0380

[Mis-transfusion Policy](#)

M-W-TS-0379	<a href="#">ABORH2 Second Specimen for Remote Sites</a>
M-W-TS-1082	<a href="#">PreAdmit Questions for Type &amp; Screen Specimen Form</a>
M-PO-TS-0102	<a href="#">PreAdmit Patients – Blood Bank Specimens (Extended Expiration)</a>

## EQUIPMENT REQUIRED

7 ml or 10 mL pink EDTA tube

Phlebotomy Supplies

## ORDERS

1. Provider or Transfusion Service Staff will order a Type & Screen in Epic
2. Orders fall to blood collection queues and will be assigned to either lab collection or nurse collection

## SPECIMEN REQUIREMENT

One full 6 to 10 ml EDTA tube of blood

**Note:** [minimum acceptable = ½ full (3 mL) or 2 mL for a patient difficult to draw]

The tube must be properly labeled AT THE BEDSIDE, which contains complete and accurate information for each of the following:

- Patient Name
- Birthdate
- Medical Record Number (optional)
- Legible initials – or – Tech ID of:
  - Collector & Verifier (Collector ID / Verifier ID)
  - Example = ND/JB
  - Each person should record their own initials or Tech ID
- Date & Time of collection

**Note:** This tube should be completely full, when possible, in case extended testing is required. Rejection of short-sample specimens or specimens without proper labeling is at the discretion of the Transfusion Service personnel.

## OUTPATIENT SPECIMEN COLLECTION CENTERS

1. Both the FOP and SJOC collect Type & Screen specimens for patients being scheduled for surgery.
2. There are times when only one person is on duty at those facilities. While they can collect the specimen per protocol in the Specimen Collection Table below, they may lack a person who can verify the specimen.
3. These two locations will phone their associated blood bank and ask that a blood bank person or phlebotomist be sent to their site to perform the verification task.
  - SJOC = 127-6654
  - FOP = 125-1191

# SPECIMEN COLLECTION

CHI-FH has strict standards as to who is considered qualified to identify patients and draw blood for testing purposes:

- Physicians
- RNs
- ED techs
- MT, MLS, or MLT
- Phlebotomists with MA-P licenses
- Hemodialysis techs with MA-P licenses
- LPNs

Select one of these people to act as the verifier of the collection, and ask them to come into the patient room with you. It will be easiest to ask the patient's RN to accompany you – or – ask another phlebotomist if staffing levels allow it.

**Note:** CNA's are NOT allowed to collect blood samples or assist as a verifier.

1. Obtain the proper supplies

#### **Actions**

- 7 mL EDTA tube
- Phlebotomy supplies

2. Bring all supplies needed into the room when you are ready to collect the specimen.

#### **Actions**

- All Blood Bank collection tasks must be performed at the patient's bedside. It is NOT permissible to leave the patient's room until collection task is completed as it interrupts the process and may lead to errors.

3. 1<sup>st</sup> person (collector) scans the patient hospital armband at the patient's bedside

#### **Actions**

- Asks the patient to state their name and date of birth, if able, while collector is observing the patient's hospital armband. If necessary, have them spell it.
- If the patient cannot perform this task due to intubation, sedation, etc, use the patient's armband to verify ID.
- Collector prints out specimen label and compares it to the information on the hospital armband to confirm patient identification accuracy.
- Both name and date of birth on both the armband and the specimen label must match exactly.
- An ADT label (from chart) may be used if a Beaker label cannot be produced.
- Resolve any discrepancies before proceeding

4. 1<sup>st</sup> person (collector) will draw the specimen

#### **Actions**

- Places label on specimen
- Record **date and time** of collection on the specimen label.
- **Print legible collector initials** with a slash following it on the specimen label. Do not obstruct the

barcode. **Example: ND/**

- Notify Verifier that patient is ready for final verification task.

5. 2nd person (verifier):

**Actions**

- Verifier may arrive prior to or when Step 4 has been completed.
- The Collector must be present in the room until Step 5 has been completed.
- Compare the patients identifiers on both the hospital armband and the specimen tube for accuracy
- State the person's name and birthdate as listed on the specimen label.
- Ask patient: Is this your correct name and birthdate?
- If patient cannot verbally respond, check the hospital armband.
- Resolve any discrepancies before proceeding.
- **Print legible verifier initials** on the specimen tube just to the right of the slash. Do not obstruct the bar code. **Example: ND/ JB**

6. **Note:** Specimens without this information will be rejected by the blood bank.

7. Place the specimen in a biohazard bag for transport to SJMC blood bank.

**Note:** Once a specimen has left the bedside, **no changes can be made to patient ID (name and DOB), date of collection, or collector/verifier initials.**

## CORRECTIONS TO THE SPECIMEN LABEL

1. Only **one** correction may be made.
  - The **time of collection** can be added by the transfusion staff after verifying it with the person who drew the specimen. No other changes can be made. The FDA requires that date and collector initials must be on the specimen prior to leaving the bedside.
2. The specimen cannot be used and will be sequestered by the Transfusion Service upon receipt in the lab when:
  - The **correct, current** date has not been either handwritten or circled on the hospital patient label
  - Collector's or verifier's initials are missing from the specimen

### Notes:

1. A circled date will most often be seen on ED specimens. Circling the date indicates that the collector has evaluated and noted the date to be correct.
2. Recollection is required in all other circumstances.

## RECEIVING TYPE & SCREEN (TNS) SPECIMENS INTO EPIC

1. Receive the specimen into Beaker.
2. In the Lab comments field in the Receiving Screen:
  - Enter the ID of the Verifier – initials will be found on the specimen.

- The smart phrase ".VERIF" can be used.
- **"Verifier was \*\*\*\*"** and add the verifier initials.
- If necessary, use the specimen update function to enter this information into the Lab Comments field.

**Note:** Both the collector initials – and the verifier initials – will be on the Type & Screen specimen. In the case below, the initials will be ND for the collector and JB for the verifier.

The screenshot shows a specimen collection form with the following fields and values:

- Date/Time: 6/16/2017 12:48 AM
- Collector: DUTCHER, NICOLE
- Department: SJMC SP AMBULATORY 2ND
- Draw type: Venipuncture
- Type: Blood
- Source: (empty)
- Lab comments: Verifier was JB

Buttons for 'Apply Defaults', 'Set Defaults', and 'Clear Defaults' are visible at the bottom right of the form.

3. At SJMC, the Type & Screen specimen falls to the Outstanding List when received.
4. For remote sites, the sample must be put on a packing list and sent to SJMC where it will be received
  - Make sure specimen at least ½ full
  - Labeled properly including ID of collector & verifier initials
5. Specimen arrives in blood bank. Use the written date and time of collection as being accurate.
  - If an ABORH2 specimen arrives later, it will be distinguishable.

## IF ADDITIONAL SPECIMEN IS REQUIRED TO COMPLETE AN ANTIBODY ID WORKUP

1. If additional specimen is needed, the SJMC Blood Bank will notify the lab at the patient's facility to collect/send more specimen.
2. The date, time, and collector's Tech ID or initials are documented on the specimen label.

## PREADMIT SPECIMENS FOR SURGERY

When patients are pre-admitted for surgery, the pre-transfusion specimen may be drawn at the time of the pre-admission, provided the surgery date is within 14 days of collection, and the questions located on the "PreAdmit Questions for Type & Screen Specimen Form" have been completed.

- A second qualified person will be required to verify the patient name and date of birth using the steps found under the **Specimen Collection** heading above.
1. Ask the patient if they have received a blood transfusion within the last 90 days. If the answer is:
    - No—then draw the patient

- Yes—then do not draw the specimen. See #3 below
2. If the patient is female and is  $\leq 50$  yrs, ask the patient if she has been pregnant within the last 90 days. If the answer is:
    - No—then draw the patient
    - Yes—then do not draw the specimen. See #3 below.
  3. If the answer to either of the above questions is YES, the patient must be drawn within 1-3 days of the surgery admission date.
  4. Return the form to the SJMC Blood Bank along with the specimen. Call 127-6654 if you have any questions.

## REFERENCE

AABB Standards for Blood Banks and Transfusion Services, current edition

## Attachments:

 [Image 01](#)

### Approval Signatures

Approver	Date
Arlene Brennan: Administrative Coordinator	09/2017
Adam Saenz: MD, Medical Director	09/2017
Shane Anderson: MD, Medical Director	09/2017
Linda Burkhardt: MD, Medical Director	09/2017
Brian Folz: Medical Director	09/2017
Joren Keylock: MD, Medical Director	09/2017
Arlene Brennan: Administrative Coordinator	09/2017
Teri Emerson: Manager-Transfusion-Quality	09/2017

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