**SUBJECT: Survey File System**

**1.0 Scope**:

This policy applies to all blood bank personnel.

**2.0 Policy**:

To provide a standardized handling system for immunohematology competency samples.

**3.0 Procedure**:

3.1 SURVEY SPECIMEN TESTING/HISTORY CARDS:

3.1.1 A LIS order will be placed for each API sample pair. In the comments section, record the API sample number so results can be connected to the appropriate survey sample (i.e. API R&S-06-2023 and DNR-02).

3.1.2 PLEASE PRINT OR WRITE LEGIBLY.

3.1.3 Blood Bank file card will be created for each survey specimen. Place a LIS label in the upper right corner of the card so the LIS number is visible. Place a comment label below (covering the barcode) so the API sample number information is visible. In the bench log place a checkmark in the column with the heading “Previous”.

3.2 BLOOD BANK REQUISITIONS:

3.2.1 Create a blood bank requisition for each sample pair (i.e. API R&S-06-2023 and DNR-02) in the same manner as patient paperwork is completed.

3.2.2 Complete the blood bank requisition as patient paperwork is completed including tech initials, date, and time of crossmatch.

3.2.3 All requisitions will be separated in Blood Bank. Distribute them as follows:

* + - * Chart copy – scan into correct order in LIS and verify/leave for Lead tech review.
      * Data Processing copy – discard
      * Blood Bank copy - discard

3.3 TESTING

3.3.1 Specimen testing (ABO, RH, IAT, and crossmatch) should be performed one at a time to reduce the chance of sample misidentification.

3.4 POST SURVEY HANDLING

3.4.1 Once sample testing is complete the patient history card is forwarded to the lead tech for review. After review and survey submission the patient history card will be filed as Proficiency in the card file system.

3.4.2 After chart copies generated in conjunction with each sample set are reviewed by the lead tech the physical copy will be stored with the API forms in the API binder for future reference and easy access for surveyors.

**Policy Review: Deny Morlino, MT**

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**Date: 4/17/2024**

**Policy Approval: Dr. Patrick C Feasel, MD**

**Laboratory Medical Director**

**Date: 4/19/2024**