PURPOSE

Patient and product identification is a crucial element in ensuring patient safety. To ensure the correct patient receives the correct product, a dual verification process is utilized to dispense blood products from the Blood Bank. Both the Medical Technologist (MT) dispensing the product and the courier receiving the product are responsible for ensuring the correct product is dispensed for transfusion to the correct patient. Blood products may only be released to RNs, LPNs, Perfusionists or providers, except under activation of the Massive Transfusion Protocol, when an aforementioned individual is not available to serve as the product courier. In these instances the blood is released to the runner, regardless of their qualifications.

DEFINITIONS N/A

PROCEDURE

1. Only one unit for one patient will be issued at a time unless an emergency situation indicates multiple units will be infused within 30 minutes to the same patient, or it is certain infusion of all released units will begin within 30 minutes (ex. the patient is on dialysis).
2. The qualified courier must bring a patient label or a copy of the order to transfuse as positive patient identification. The lab is not authorized to issue units without this identification process, unless an emergency dispense of blood products has been requested by the Emergency Department.
3. Blood products for multiple patients will NOT be issued at the same time to the same RN/LPN, Perfusionist or Provider. Blood may only be issued to one patient at a time.
4. If multiple units of RBCs are being released simultaneously to either ED or OR and they are going to be held for use as needed (not immediate transfusion), then they must be issued in a storage cooler.

SURGERY PATIENTS

1. Surgery notifies the Blood Bank, usually by phone, when a unit of blood on a specific patient is needed.
2. Unit segments are removed (as described below) and the unit is placed in a plastic bag for transport to Surgery by Blood Bank personnel.
3. In Surgery, the “Consent for Transfusion of Blood Products” or patient label is obtained from the patients chart and is reviewed by the Blood Bank personnel issuing the unit.
4. Continue with the following “Double Vision” process below to check out blood products.
5. After “Double Vision” has been completed:
6. The Issuing Tech and Nurse/Physician document their Cerner ID and the date/time the unit was issued in the box on the bottom left portion of the Unit Tag.
7. This portion is then removed by the Blood Bank tech and returned to the Lab for Dispense data entry in Cerner (see “Dispensing blood in Cerner” section below). File this portion of the Unit Tag in the bins labeled “Downtime/Surgery Dispense Info”.

ROUTINE DISPENSING

1. The qualified courier must bring a patient label or a copy of the order to transfuse as positive patient identification. The lab is not authorized to issue units without this identification process, unless an emergency dispense of blood products has been requested by the Emergency Department.
2. The dispensing process is begun by the MT as follows:
3. Select the appropriate product from the storage unit.
4. Access “Assign/Dispense” application.
5. Select “Dispense” from the Task Menu.
6. Search using the patient’s FIN (preferable) or other identifier.
7. Scan the Product Donation Identification Number in the appropriate field.
8. Click on the <SAVE> button to open the “save dialog” box.
9. If the physician name has not defaulted into the “Physician” field type in the beginning letter(s) of the physician’s last name and select the correct physician from the dropdown list.
10. Press <TAB> to advance to the reasons dropdown list and select a reason for transfusion.
11. Press <TAB> to select the reason and advance to the “Visual Inspection” field. Inspect the unit for breakage, abnormal color, and correct labeling. If the unit is acceptable enter “O” or select “OK” from the dropdown list. If the unit is unacceptable, do not release the unit for transfusion.

Quarantine the unit until destroyed, returned to the blood provider or released into stock. See “Quarantine/Destruction of Blood Products” procedure.

1. Press <TAB> to accept the entry and to advance to the courier field.
2. Type the second verifier’s initials and their Lawson number into the “Courier” field (RN/LPN, MT, etc., depending on the circumstances).
3. Press <TAB> to accept the entry and advance to the cooler field. No entry is made in this field unless a cooler is being used.
4. Press <TAB> to advance to the Blood Bank ID field.
5. Enter the Blood Bank ID number.
6. Hand the Blood Product Administration Worksheet to the qualified courier.
7. The nurse reads the following information off of the worksheet as the MT verifies that the information is identical to that on the computer screen, the information provided to request the unit, on the crossmatch tag affixed to the unit and the unit itself.
8. Patient’s name
9. Medical record number
10. Patient’s Blood Bank Identification number
11. The product Donation Identification Number
12. Product ABO/Rh
13. Patient ABO/Rh

g. Special transfusion requirements

h. Expiration date and time of the product

i. Compatibility (if applicable)

j. Click <OK> and exit the application.

4. Blood products CANNOT be issued if there is any discrepancy in any of the items listed in #3 above. Any and all discrepancies in patient versus product versus records must be resolved BEFORE product is released for transfusion.

5. The unit is placed in a blue plastic bag and then physically released to the courier for immediate transport to the appropriate nursing unit.

6. Blood products shall not be stored in any storage unit (refrigerator, freezer, etc.) other than an approved temperature monitored Blood Bank storage unit.

7. Blood products dispensed from the Blood Bank and not infused can be returned if the temperature of the unit is ≤10°C and the unit has not been entered (spiked). If the transfusion cannot be started within 30 minutes of product issue the product should be returned to the Blood Bank.

8. Products returned >10°C may not be returned to general inventory. However, the expiration date and time of the product may be modified to reflect an expiration of four hours from the time of original issue. The unit may only be re-released to the same patient. If the unit is then re-issued for **the same** **patient,** the unit must be completely infused prior to the unit’s new expiration date and time.

9. If a transfusion is begun and not completed the patient will be charged for the blood product.

NOTES

1. Units dispensed and not returned to the Blood Bank are updated automatically in the computer system to transfused 30 minutes after issue. Units dispensed in a cooler will not automatically update and any units transfused must be manually updated in Cerner using the “Final Disposition” application.
2. When products are returned to the laboratory the “Return to Inventory” application in the computer system is used to document the return of the product and to make the product available for future use. The product must be inspected for the following conditions prior to returning the product to inventory. If any of these conditions is not met the unit cannot be returned to inventory, it must be destroyed.
   1. The unit was returned within an acceptable time period:
      1. Products not issued in a cooler ≤ 10°C
      2. Products issued in a cooler before the time expires on the cooler AND the temperature indicator (RBCs only) is still white; indicating the RBC temperature was within 1-10°C
   2. The container closure has not been disturbed.
   3. At least one sealed segment of the integral donor tubing has remained attached to the container (RBCs only).

CERNER DOWNTIME

1. If Cerner is down, the Unit Tag may be replaced by the Blood Bank Unit Requisition when a unit is processed during downtime (See procedure “***Blood Bank Requisition***”).
2. The Unit Tag is available for units processed when Cerner was live. In this case the staff performing double vision documents the dispense information on the bottom, left, sticker of the unit tag. The data is entered in to Cerner when it becomes available.
3. Cerner does not allow units with an expired crossmatch to be dispensed without a warning. If Cerner is down, the unit crossmatch expiration date/time must be checked manually if the unit is dispensed.

RELATED DOCUMENTS N/A

REFERENCES

1. AABB, 18th Edition. (2014). *Technical Manual*, Bethesda, Maryland: AABB.

2. AABB, 30th Edition. (2016).*Standards for Blood Banks and Transfusion Services*,

Bethesda, Maryland: AABB.