[](http://depts.washington.edu/labweb/i)

|  |  |  |
| --- | --- | --- |
| **University of Washington,**  **Harborview Medical Center**  **325 9th Ave. Seattle, WA, 98104**  **Transfusion Services Laboratory**  **Policies and Procedures Manual** | **Original Effective Date:**  **September 2nd 3013** | **Number:**  **C5002-1** |
| **Revision Effective Date:** | **Pages: 3** |
| **TITLE: Receiving Autologous Cranial Bone Flaps into Storage for Re- implantation** | | |

**Purpose**

To provide instruction for storing and tracking autologous bone tissue for re-implantation

**Supplies**

* Barcoded number labels
* Cryo-labels
* Cryo-pens
* Cryo-gloves
* Orange Quarantine slips

**Procedure**

|  |  |  |
| --- | --- | --- |
| **Step** | **Action** | **Related Documents** |
| 1 | * Receive autologous cranial bone flap sample and completed Tissue Tracking Record from OR designee * Time stamp the Tissue Tracking Record. | * Tissue Tracking Record |
| 2 | * Perform 2 person verification of patient identifiers with OR designee. * One person reads the patient’s MRN and spells out the patient’s entire name from the autologous cranial bone flap package. * At the same time, the second person verifies the MRN and the patient’s entire name on the Autologous Cranial Bone Flap Tracking Record accompanying the bone flap sample. |  |
| 3 | * Perform visual inspection of the Cranial Bone Flap Package. * Ensure the envelope is completely sealed. * Check for any holes, tears, or damage to the envelope. * If the package is not intact, or shows signs of damage, notify the Neurosurgery attending on the case, as well as the TSL Manager or Medical Director immediately. * Document incident with QIM and complete online incident report through PSN. | * Visual Inspection of Tissue Package |
| 4. | * Verify the Autologous Bone Flap Tracking Record is complete with the following required elements: * Patient name, MRN, and Date of surgery. * Site of tissue procurement * Time of procurement and preparation of bone flap package. |  |
| **Step** | **Action** | **Related Documents** |
| 5. | * ID of staff performing preparation * Bone Flap Type * Preparation directions, method, and materials * Signature, date, and time of person completing form. * Printed name, signature, date and time of person verifying the tissue culture collection   **NOTE:** Culture must be collected on cranial flaps prior to placing into tissue inventory.   * If no culture was collected, notify the neurosurgery attending for the case and the TSL Manager or TSL Medical Director immediately. * Document with a QIM, and complete an online incident report through PSN. |  |
| 6. | * Assign a unique identification (ID) number by attaching a unique barcoded sticker to the bottom right corner of each of 4 copies of the Autologous Bone Flap Tracking Record. |  |
| 7. | * Record your Tech ID in the “Name of Staff Accepting Tissue” column on the Tissue Tracking Record. |  |
| 8. | * Give the white, canary, and pink copies of the Tissue Tracking Record to the OR designee, and retain the goldenrod TSL copy. |  |
| 9. | * Have the OR designee initial the Autologous Bone FlapTracking Log in the “Delivered by” column. |  |
| 10. | * Complete the Tissue Tracking Log by attaching a unique ID number sticker and filling in the following information: * Patient Name, MRN and Date of Surgery * Tissue Type * Recovering surgeon * Date/Time placed in freezer. * Expiration Date (2 years from collection date) |  |
| 11. | * Prepare an “autologous Donor” cryo-label by attaching a unique ID number sticker in the upper right corner and filling out the following information:   NOTE: Always use the Cryo-Pen when filling out these labels.   * Recovering surgeon * Retrieval Location (i.e. OR 13) * Patient Name and MRN * Expiration date (2 years from collection) * Age * Gender * Tissue Type * Collection Date/Time |  |
| 12 | * Attach the completed cryo-label to the bone flap package. Do not cover up any hand-written information. |  |

|  |  |  |
| --- | --- | --- |
| **Step** | **Action** | **Related Documents** |
| 13. | The Autologous cranial bone flap must be stored in the quarantine section prior to the receipt of negative culture result.   * Timestamp an orange Quarantine slip. * Record the reason on the slip (i.e. culture results pending). * Record Tech ID * Rubber-band the Quarantine slip to the bone flap package. * Store flaps on the quarantine shelf in the -80C freezer, in the section for pending culture results. This is intended to prevent re-implantation while culture results are pending. |  |
| 14. | * Staple the extra barcoded unique ID number stickers to the back of the goldenrod TSL copy of the Autologous Bone Flap Tracking Record. |  |
| 15. | * Place the goldenrod TSL copy of the Autologous Bone Flap Tracking Record in the Quarantined section of the Autologous Bone Flap Tracking Record binder, arranged in alphabetical order. |  |

**References:**

Standards for Blood Tissue Banking, Current Edition, American Association of Tissue Banks. AATB, Bethesda, MD.