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| **University of Washington,**  **Harborview Medical Center**  **325 9th Ave. Seattle, WA, 98104**  **Transfusion Services Laboratory**  **Policies and Procedures Manual** | **Original Effective Date:**  **March 10, 2014** | **Number:**  **C5006-1** |
| **Revision Effective Date:** | **Pages: 5** |
| **TITLE: Release of Autologous Bone for Transport to Outside Facility** | | |

**Purpose**

To describe the process for releasing autologous bone from Harborview Medical Center (HMC) to an outside facility within Washington State for re-implantation.

**Procedure**

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| **Step** | **Action** | **Related Documents** |
| **Receipt of Initial Notification (Request) for Re-implantation at another facility:** | | |
| **1** | Requesting facility notifies HMC TSL of scheduled procedure requiring the transfer of autologous bone:   1. Obtain the name of the requesting facility, Patient name and HMC MRN, and planned surgery date. 2. Record the caller’s name, phone number and email. 3. Confirm availability of autologous bone. Communicate status to the caller. 4. Email Autologous Bone Release for Transfer to Outside Facility form to the requester. Facility will complete patient information. *Note:* *Requesting facility courier brings the form to HMC TSL.* 5. Print the Autologous Bone Release for Transfer to Outside Facility form for HMC TSL. 6. Prepare an Autologous Bone Transport Record and Checklist for Release of Autologous Bone to Transfer to an Outside Facility form   ***NOTE:*** *Obtaining appropriate permissions for transfer may take 7-14 days.* | * Autologous Bone Transport Record * Autologous Bone Release for Transfer to Outside Facility form * Checklist for Release of Autologous Bone to Transfer to an Outside Facility form * Autologous Bone Tracking Log |
| **2** | Verify TSL Records and Bone Package:   * Patient information * Location of autologous bone * Integrity of bone packaging * Culture result status * Expiration of bone package |  |
| **Step** | Action | Related  Documents |
| **3** | * **Acceptable for release** to outside facility, proceed to step 4. * **Unacceptable for release**: notify the Neurosurgery Attending at the requesting facility, as well as the TSL Manager or Medical Director immediately: * If bone package fails visual inspection * If a “Notification for Release of a Non-Conforming Autologous Bone” form is attached to the Tissue Tracking Record * Document incident with QIM. * Process *Notification for Discard of Bone* form with a Notification Letter. | * Storage and Release of Non-Conforming Autologous Bone * Notification for Release of a Non-Conforming Autologous Bone form * Quality Improvement Monitoring tool (QIM) * Discarding Autologous Bone * Notification Letter |
| **4** | TS staff completes paperwork and posts forms on the erasable board by HMC TSL front desk.   * Checklist for Release of Autologous Bone to an Outside Facility * Autologous Bone Transport Record * Autologous Bone Release for Transfer to Outside Facility form (copy) * Notification for Release of a Non-Conforming Autologous Bone form, if applicable * Tissue Tracking Record and Culture result |
| **Releasing Autologous Bone to another Facility:** | | |
| **1** | **Approximately 1 hour prior to courier arrival**:   1. Obtain approximately 4 pounds dry ice from Specimen Processing GWH47 2. Fill tissue transport box with dry ice. 3. Allow box to equilibrate to proper temperature for one hour prior to placing frozen tissue in box. 4. Place a calibrated ultra low -80ºC thermometer inside the box. 5. Prepare envelope for paperwork to accompany shipping container containing copies of the following forms:  * Tissue Tracking Record * Culture Results * Notification for Release of a Non-Conforming Autologous Bone form, if applicable  1. Place the box, envelope, Tissue Tracking Record and Autologous Bone Tracking Log on the TSL counter. 2. Complete the Transport Package Label as much as possible:  * Address of receiving facility. * Type and quantity of coolant used | * Transport Package Label * Manila Envelope |
| **Step** | Action | Related  Documents |
| **2** | Courier arrives with Autologous Bone Release for Transfer to Outside Facility form. Review for completeness:   * Satisfactory: proceed to step 3 * Incomplete/Unsatisfactory: contact the TS Manager or Lead |  |
| **3** | Remove and inspect the bone package from the monitored storage. | Maintaining and Issuing Autologous Bone |
| **4** | * Acceptable for release to outside facility, proceed to step 5. * Unacceptable for release: * If the package fails visual inspection, notify the Neurosurgery Attending at the requesting facility, as well as the TSL Manager or Medical Director immediately. * Document incident with QIM and complete online incident report through PSN. * Process Notification for Discard or Transfer of Bone form. |  |
| **5** | Perform a two person verification read-back with a 2nd TSL tech between the Autologous Donor Cryo-label and the Tissue Tracking Record Form.:   * Patient Name and MRN * Unique ID number | * Bone Package * Tissue Tracking Record |
| **6** | Complete the Autologous Bone Transport Record:   * Complete the section labeled: *To be completed by Shipping Facility*   + Affix unique ID number to the form.   + Type of Tissue, Date/Time and Tech signature   + TSL tech ID for techs performing two person verification read-back | Autologous Bone Transport Record |
| **7** | With the Requesting Facility Courier:   * Perform a two person verification read-back of the patient identifiers between the Autologous Bone Release for Transfer to Outside Facility form and the Tissue Tracking Record * Patient Name * Requesting facility Medical Record Number * Harborview MRN * Date of Birth * Sign the Autologous Bone Release for Transfer to Outside Facility form. * Place the form in the manila envelope. | Autologous Bone Release for Transfer to Outside Facility form  Tissue Tracking Record |

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| **Step** | **Action** | Related  Documents |
| **8** | Update the Autologous Bone Tracking Log   * Date/Time of removal from monitored storage. * TSL Tech ID in the “Issuing Tech ID” field. * Receiving Facility in the “Issued To” field. | Autologous Bone Tracking Log |
| **9** | Pack the tissue for shipment:   * Place about 2 pounds of dry ice at the bottom of the container. * Insert bone package and calibrated ultra low -80ºC thermometer. * Layer about 2 pounds of dry ice over the bone package. * Replace the cover. * Place the form inside the shipping box to be completed by the Receiving Facility and mailed/faxed back to TSL upon final disposition of the bone. * Seal the box with packing tape and affix appropriate warning label on the upper right hand corner of the box (i.e. dry ice, biohazard, category B specimen label). * Complete the Transport Package Label and tape to outside of transport container:   + Date/Time bone was packaged in box.   + Assign Expiration date of 24 hours from that date/time.   *Note: Do not include thermometer if shipping to out of area facility.* |  |
| **10** | Send the envelope with the shipping container. The envelope should contain:   * Autologous Bone Release for Transfer to Outside Facility form * Culture Report (copy) * Tissue Tracking Record (copy) * Notification for Release of a Non-Conforming Autologous Bone form, if applicable |  |
| **11** | Place the TissueTracking Record in the “Issued” section of the Autologous Bone Tracking Binder. |  |

**References:**

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