**Purpose:** To outline the Harborview Medical Center (HMC) Transfusion Services Laboratory Policy for Inventory Management

**General Policy Statements:**

|  |  |
| --- | --- |
|  | **Statement** |
| **1** | The HMC Transfusion Service has established polices for inventory management that ensure adequate blood for patient care needs while managing the community blood supply conservatively and respectfully. |
| **2** | A blood component storage policy is in place to aid in utilization of older blood components first. |
| **3** | Components will be rotated back to the blood supplier based on contractual agreements and special requests in order to minimize the outdate of short dated blood components. |
| **4** | Autologous and directed blood components will be used before allogeneic components. |
| **5** | Inventory levels will be revised by the TS Manager and Medical Director based on frequency and volume of orders from and returns to the blood supplier. |
| **6** | Special processing that shortens the product outdate will be performed only when there is an order to transfuse the product. |
| **7** | Orders to “keep on hand” or “keep ahead” crossmatched RBCs or thawed plasma will be evaluated by the Medical Director on an individual basis. |
| **8** | TS staff will notify Transfusion Service Physician staff when products ordered for the patient have not been utilized and the outdate is approaching. |
| **9** | LIS reports will be utilized to:* Release expired compatibility testing RBCs to general inventory
* Identify short date products for priority use
* Match physical units to LIS report daily.
 |
| **10** | Wastage and outdates * Will be identified and reported to the TS Manger via QIM form.
* Will be investigated, tracked, and trended as a quality indicator and part of the Quality Improvement process.
 |

**References**

AABB Standards for Blood Banks and Transfusion Services, Current Edition