**Purpose:**

This process provides an overview of workflow for resolving discrepant testing results.

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|  | **Action** | **Related Documents**  |
|  | **If** | **Then** |  |
| **1** | * If ABO, RH or Antibody Screen test results exhibit the following:
	+ Current results do not match previous testing on record.
	+ Current results do not correlate between tube and TANGO methods.
	+ Current results do not correlate with patient personally communicated results.
 | * Proceed to Historical Record Investigation below
 | Historical Data Resolution Policy |
| **2** | * If ABO forward and reverse type do not agree or show unexplained mixed-field results on ABO antisera tubes
 | * Refer to ABO Discrepancy Resolution Process
 | * ABO/D Typing by Tube Method
* ABO Discrepancy Resolution Process
 |
| **3** | * If Rh/D test results have positive reaction strength <2+, unexplained mixed-field reactions, or are negative when historical results were positive.
 | * Follow the procedure for performing a weak D test.
* Utilize other manufactured sources of Anti-D
 | * Weak D test by Tube
* ABO/D Typing by Tube Method
 |
| **Historical Record Investigation and Clerical Check** |
| **1.** | * Compare patient sample, label, paperwork and SQ result entries for the following information:
	+ Full name: last, first, and middle name.
	+ Hospital identification number (HID).
	+ Phlebotomist ID (recorded on both sample and order).
	+ Date and time of sample collection.
* Investigate alias names in ORCA/EPIC
 | * Historical Data Resolution Policy
* Sample Acceptance Evaluation
* Sample Rejection Policy
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| **Historical Record Investigation and Clerical Check** (continued) |
|  | **If** | **Then** |  |
| **2.** | If **any** of the above patient identification is found discrepant:  | * Request patient sample redraw.
* Pull all available patient samples.
* Do not result interpretation of current testing which was found discrepant.
* Reassign the blood bank computer orders to the correct patient HID account.
* Credit any orders that may have been completed on the wrong patient HID, as necessary.
* Perform testing on redraw sample.
 | * SQ Order Entry Process
 |
| **3.** | If **none** of the above patient identification is found discrepant | Proceed to repeat testing below with the existing patient sample. |  |
| **Testing** |
| **1.**  | If only ABO/ Rh testing was ordered,  | * Repeat all immediate spin testing on appropriate samples
* Record results on Discrepancy worksheet.
 | * ABOD by tube method
* Antibody screen by LISS tube IAT
* Crossmatch by LISS Tube IAT Method
* ABO/Rh Discrepancy Worksheet
* LIS Downtime Manual Bench Testing Form
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| **2.** | If other testing was ordered on the specimen (Antibody Screen, DAT, Crossmatch)  | * Complete full testing phases on appropriate samples
* Record on LIS Downtime Manual Bench Testing form

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| **Evaluate Discrepancy** |
| **1.** | **If** | **Then discrepancy is** | **Take action** | * Selection of Red Blood Cell Units
* Selection of Platelets, Plasma, and Cryo
* Emergency Release Allocation Process
 |
| * + Second set of test results matches original record, alternative test method or patient verbal account of testing,
 | * Resolved
 | * Interpret ABO/Rh, antibody screen, and/or other test results.
* Record on worksheet and in computer.
* Re-assign blood products as requested for patient transfusion.
 |
| * + Second set of testing results does not match original record, alternative test method or patient verbal account of testing,
 | * Not resolved
 | * In the event of urgent blood transfusion requests, issue universal donor type components and/or uncrossmatched components, as applicable.
* Notify TS Manager and TS Medical Director.
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**References:**

AABB Standards for Blood Banks and Transfusion Services, Current Edition.