**Purpose**

To outline process of receiving, pre-transfusion testing and applicable compatibility testing for issue of directed donor blood components at HMC TSL.

**Policy**

HMC TSL will accept and process directed donor units for HMC patients only. Directed donor units are only to be given to the intended recipient. Crossmatch will be performed on directed donor units that have >2ml of red blood cells.

**Table A: Designated Products**

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| --- | --- | --- |
| **Product Name** | **Product Information** | **SQ Test Battery** |
| Granulocytes | Requires crossmatch, always irradiated | TXM/TSCR |
| HLA-Matched Platelets | Does not require crossmatch, always irradiated | TPLT |
| Directed red blood cells | Bloodworks (BWNW) does not collect or accept directed RBCs from other facilities. Consult with TS Lead if directed RBCs are received. | TXM/TSCR |

**Process**

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| --- | --- | --- |
| **Step** | **Action** | **Related Documents** |
| **Receiving Directed Donor Units** | | |
| 1 | Compare unit number to Order Distribution Report(ODR)   * Match: Continue * Does not match, contact the blood supplier |  |
| 2 | Inspect product tags related to designation   * Directed Donation Tie Tag * HLA-Matched/Crossmatched Apheresis Tie Tag | Blood Product Inspection Policy  Visual Inspection of Red Cell Products  Visual Inspection of Plasma Products |
| 3 | Access Blood Bank Inquiry (BBI) function   * Perform patient search using patient information on the bag tag. * Patient in LIS:   + Record HID on Order Distribution Report (ODR).   + Verify accuracy of bag tag against SQ administrative data. | SQ Using Blood Bank Inquiry |
| **SQ Blood Product Entry and Testing** | | |
| 4 | Open BPE   * Scan unit number * Scan product code * Scan ABO/Rh code * Scan Unit Expiration * Scan other codes as applicable | SQ Blood Product Entry |
| **Step** | **Action** | **Related Documents** |
| 5 | Click on Assignee tab   * **IF HID Available**: * Enter patient HID in appropriate field. * Patient Name should display in NAME field. * ADD to assign this patient to the unit. * **IF No HID**: * Click on SEARCH by HID entry field. * SEARCH by patient name. Press “ADD”. If an HID is in the system, it will display. * Enter patient name in appropriate field.   *Note: Without an HID, unit will not be assigned to the patient.* |  |
| 6 | * Click on Comment tab and free text:   + (**Type of product**) for (**patient name, HID**)     - Press “ADD”.     - Comment Code: GRAN or Free Text     - SAVE |  |
| 7 | * Complete BPE. Retention sample is stored with allogeneic units received that day. * Perform BPT for visual inspection. * Forward to an MLS:   + For Blood Bank Administrative Data update.   + Unit label type confirmation testing | SQ Blood Product Testing |
| 8 | MLS will   * Perform unit type confirmation for granulocytes and red blood cells * Access Blood Bank Administrative Data Entry * In Comments, enter free text comment: Product type and unit number. *Example: Granulocyte W141616222222* * Record patient name and unit number on the Antibody whiteboard near Bench D | SQ Blood Product Testing  Unit Type Confirmation Using Tube Method |
| 9 | Store unit(s) in appropriate area | Blood Product Storage Policy |

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| --- | --- | --- |
| **Step** | **Action** | **Related Documents** |
| **1** | * Perform clerical check and resolve any discrepancies: * Check specimen label against request and computer entry | SQ Order Entry Process |
| **2** | * Determine specimen acceptability | Specimen Acceptance Evaluation |
| **3** | * Confirm that processes and attributes: * On the blood request are entered into the patient computer record * On the patient computer record are recorded on the blood request | SQ Order Entry Process |
| **4** | * Review BAD file and order when the product is needed * Continue with this procedure if Directed Donor units are ordered. | SQ Order Entry Process |
| **5** | * Look for evidence of received Directed Donor RBC units on this patient. * Granulocyte products must be expedited immediately due to the short expiration date. Prioritize this unit crossmatch and its allocation process above other routine work. * All Directed Donor products (RBCs or Granulocytes) should be irradiated. If received without irradiation, contact supplier. * If units were received before specimen drawn, and patient had an HID at that time, units should appear in BBI under “Auto/Directed Donor” tab. * If units were received before specimen draw, but no HID was created, units will be entered into Sunquest but will not appear linked to a patient account. Check for this possibility by looking for patient name on Antibody whiteboard and on patient specific shelf. |  |
| **6** | * + Determine applicable testing profile   + Confirm order of TSCR or TXM Test Battery.   + All Directed Donor units must be crossmatched using same criteria as homologous donors (either electronic serologic, depending on patient antibody status).   + 2nd ABO/D required on patients with Unknown blood type or no serologic result history of previous ABO/D testing | Policy for the Provision of Crossmatch Compatible Blood  Quality Policy-Preanalytic Standards  Compatibility Process |
| **7** | Adjust test profile, if needed. |  |
| **8** | Select test profile in BOP. | SQ Blood Order Processing |
| **9** | Review Units Ordered field for accuracy and adjust if needed. |  |
| **10** | Complete patient specimen test “History Check”. |  |
| **11** | Perform indicated testing and enter reaction results and interpretations:   * + ABO/D on patient   + AS on patient   + Unit crossmatch, if indicated. | ABO/D by Tube Method  Antibody Screen by LISS Tube IAT Method  Antibody Screen by IAT Automated Method  Crossmatch by Immediate Spin Tube Method  Crossmatch by LISS Tube IAT Method  Compatibility Process  TANGO SOPs |
| **12** | Select appropriate donor units in this order:   * + **If only Directed Donor units are ordered,** proceed to unit allocation.   + **If multiple donor source units are ordered,** follow setup and issue in this order:   + **Autologous** are always issued first   + **Directed donor units** are issued after autologous.   + **Allogeneic** units are issued third, autologous and directed donor units. |  |
| **13** | Allocate selected directed units for patient.   * + Review test reactions and inspect unit. Complete unit TS field:   + If acceptable for transfusion, enter OK; continue to next step   + If unacceptable for transfusion, enter Not OK; remove unit from order and quarantine | Visual Inspection of Red Cell Products  Visual Inspection of Plasma Products  SQ BOP Test Result Guide  Quarantine of Blood Products |
| **14** | If additional units (e.g. allogeneic) are needed to be crossmatched for this patient, refer to applicable procedures and processes. | Compatibility Process |
| **15** | * + Bag tag clerical check.   + Review Transfusion Tag for legibility and completeness; compare to testing computer record. If acceptable for accuracy, enter OK ;continue to next step   + If unacceptable for accuracy, resolve discrepancy with correct tags or enter Not OK; remove unit from order and quarantine. Contact supplier if error appears to be on unit label. | SQ BOP Test Result Guide |
| **16** | Attach Transfusion Tag to unit. |  |
| **17** | Complete BOP entry with Save. If unit is a Granulocyte or RBC requested for immediate issue, choose “Issue”. If not issued immediately after testing, select “No”. | SQ Blood Product Issue |
| **18** | Store Directed Donor RBC units (and allocated RBC) unit(s) not requested for immediate issue. | Blood Product Storage Policy |

**References:**

Blood Bank User’s Guide, Misys Laboratory

AABB Standards for Blood Banks and Transfusion Services, Current Edition