**Purpose:**

To describe the preadmission protocol process for patients scheduled for surgery

**Policy:**

Qualification for the preadmission protocol requires a patient history of no pregnancy or red cell containing component transfusion within the last 3 months. These patients may have their pretransfusion samples drawn up to 30 days before a planned surgery or procedure. Patients who have been pregnant or transfused within the last 3 months or otherwise do not meet the acceptability criteria are disqualified and must have their sample drawn within 72 hours of the planned surgery or procedure.

**Process:**

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| **Step** | **Action** | **Related Documents** |
| **Initial Receipt** | | |
| 1 | **Collection**   * Request and sample are collected by various clinics at HMC. * Clinical care staff will draw the sample and document on the form that the answers to the following questions are “No”.   + “Have you been pregnant in the last 3 months?”   + “Have you received a transfusion in the last 3 months?” * Signature of the questioner is required. | Transfusion Services Preadmission Testing & Red Blood Cell Order Form |
| 2 | **Receiving and Entering Preadmission Orders**   * Sample and order for preadmission testing and/or blood products are received. * TSL staff performs Sample Acceptance Evaluation and reviews the request:   + All order information completed.   + Documented answers to the required questions below.   + Signature of clinical staff asking the questions * Incomplete forms will be evaluated. Completion by the clinical care staff is possible when:   + Signature is missing and staff member who asked the questions is available to come to TSL and sign the form. * Specimens and paperwork that are not acceptable by our SOP will be rejected * Enter Orders into the LIS using current encounter location:   + Enter “Preadmission” in the Order Comments. | Sample Acceptance Evaluation  SQ Order Entry Process  Sample Rejection Process |
| 3 | **Qualification for Extension of Compatibility Expiration Date (EXX):**   * Open Blood Bank Inquiry (SQ) * Access Patient Order List screen * Review Antibody History   + Positive antibody history or positive antibody screen on current sample **are not** eligible for preadmission protocol. * Examine “Received By” and “Issued” columns for any orders in addition to the Preadmission order for the previous 3 months. * If orders exist, look for PREN and/or Issued blood components.   + Patients who have had a prenatal test and/or received allogeneic red cell containing blood components (red blood cells and/or platelets) within the previous 3 months are ineligible for preadmission.   + Patients who have received blood components that do not contain allogeneic red blood cells (plasma and cryoprecipitate) may be eligible for preadmission. * Subtract the draw date from date of surgery/procedure.   + If less than or equal to 30, the patient may qualify for preadmission.   + If greater than 30 days, the patient does not qualify for preadmission. * Confirm both questions are answered “No” and there is a signature of the clinical care staff who asked the questions. * Proceed to testing. | SQ Using Blood Bank Inquiry |
| 4 | **Testing**  *Note: If the patient does not qualify for extension it is acceptable to perform testing but Antibody screen testing must be credited. The ABO/Rh result can be used as an ABRH2.*   * Perform ABO/Rh and Antibody Screen testing within 48 hours of sample draw. * Clinic may or may not get the CPOE ABRH2 order. * Perform ABRH2, if applicable: * 2nd sample can be submitted with any order form, it does not need the Preadmission Form to be resubmitted. * 2nd sample can be drawn on admission. * Patient will receive universal donor products until 2nd sample is received | ABO D Type by Tube  Antibody Screen by LISS Tube Method  Antibody Screen by PeG Tube IAT Method  TANGO Operating Procedures  Guidelines for Antibody Identification |
| 5 | **Record Preadmission Eligibility**   * If all parameters are met, the patient is eligible for extension of the compatibility validity date. * Adjust the test EXX: The sample expires at the end of the 30th day or 3 days after surgery, whichever is sooner. * Add a BBC comment:   + Preadmission Order for (surgery date), Date, Tech ID   + Second sample for ABRH required (if applicable) * No further notification is required. |  |

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| **Ineligible Preadmission requests** | | |
| 5 | **Correction possible**   * Signature missing for questions: Allow personnel who asked the questions and completed the form to come to TSL and sign. * Missing surgery/procedure date: Call and request date. Record on Preadmission form.   **No correction possible** **or Patient does not meet sample acceptability requirement**   * Do not adjust Compatibility Validity Date. * Process as a routine TSCR/TXM. * Notify clinical care location:   + Failure and reason   + Status of order and blood components for transfusion   + Request new sample be collected upon admission for remaining testing (TSCR and/or ABRH2) * Complete QIM and PSN. * Add comment(s) and billing credits to SQ:   + Surgery/procedure date is ≤ 3 days in the future     - Add BBC: Preadmission Order for (surgery date), sample ineligible for extension, Date, Tech ID * Surgery/procedure is >30 days * Credit antibody screen (ASCR) * Add BBC: Preadmission Order for (surgery date), sample ineligible for extension, Date, Tech ID | Sample Acceptance Evaluation  ABO D Type by Tube  Antibody Screen by LISS Tube Method  Antibody Screen by PeG Tube IAT Method  TANGO Operating Procedures  Guidelines for Antibody Identification |
| 6 | Preadmission Request: Passed and Failed   * + File in the Preadmission Surgery Pending File by date of procedure   + Rack sample | Sample and Unit segment management process |
| **One Day prior to Surgery/Procedure** | | |
| 7 | **Confirm eligibility one day prior to surgery/procedure date:**   * Repeat qualification check (step 3 above). * Write “Checked”, date, and tech ID in the bottom right corner of the Preadmission form. * If the patient no longer is eligible for preadmission:   + Notify clinical care location of failure and reason.   + Complete QIM and PSN.   + Review collection date:     - Samples drawn within 3 days of surgery/procedure day can be used. Change EXX to surgery/procedure date or original 3 day expiration, whichever is longer.     - Samples drawn more than 3 days prior to surgery/procedure cannot be used. Change EXX to that day’s date.   + Add BBC comment stating patient is not eligible for preadmission. * Return request to Preadmission folder |  |
| **History of Antibodies or Current antibody screen positive** | | |
|  | * Notify the Lead and Medical Director if patient has a Positive Antibody History or Positive results on current sample * Sample is only valid for 3 days post collection * Identify the need for crossmatched blood products with the patient’s physician or TSL Medical Director * Set up units per physician or TSL Medical Director notification * If units need to be ordered from PSBC, place order ahead to give adequate time for receipt and crossmatch for surgery |  |
| **Day of Surgery/Procedure** | | |
| 8 | Day of surgery/procedure, contact clinical care site and request sample if:   * Preadmission order failed and an in date sample is not available * ABRH2 is required but has not been submitted. * Patient has a positive antibody history and/or positive antibody screen.   Complete any required antibody identification and crossmatch units for antibody patients.  File Preadmission requests in the Completed Orders file folder. |  |

**References**

**Standards for Blood Banks and Transfusion Services, Current Edition. AABB. AABB Press, Bethesda, MD.**