**Morning Meeting Attendees**

**Afternoon Meeting Attendees**:

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| **Agenda Item** | **Discussion** |
| **Vacation and Holiday Schedules** | * Holiday rotations are designed to allow more staff to spend the holiday with their family by combining the holiday with the adjacent weekend. * Talk to schedulers if you are interested in posting your holiday for staff to volunteer. Working a shift for someone on a year you are not scheduled, does not change the holiday you have off for the following year. The holiday schedule is designed to allow staff to plan holiday’s in advance. |
| **Staffing updates** | * MLS 2 positions x3 – hiring near completion * MLS 1 days – reviewing applications * CLT 2 nights – reviewing applications * MLS 1 x2 (eve, night) – pending approval |
| **Most common BPDs** | * Component not issued in SQ * Special requirement not met – IRR * Reduced volume not provided * Wrong blood type - plan required specific ABO or Rh * Improper product selected for patient - Pooled vs apheresis, RBC instead of PLT, etc. |
| **Conversion of BBHOLD to TXM** | * Multiple errors related to receipt using current date instead of actual date of collection when ordering the TXM * Requires billing corrections and sample expiration updates |
| **Selection of the correct issue account number** | * Selection of the wrong issue encounter can lead to billing the SCCA for products administered here at UWMC. Use the billing encounter on the component release form. * Report errors on a QI |
| **Safety** | * New Employee Safety Tour to be repeated with MTS documentation for all staff members. |

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| **SCCA sample processing**  **(multiple testing ordered on different accessions)** | * SCCA is working to update the ORCA Power Plans to reflect the Type & Screen instead of ABO/RH and antibody screen separately * Until the issue is resolved continue to cancel both tests and order a TSCR or add the screen to the ABO/Rh. The TSCR is preferred if RBC transfusion is anticipated. |

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| **Cord Blood Testing** | * Cord blood testing is required for the following:   Mom – any of the following apply:   * + Type unknown   + Group O   + Rh negative   + Has clinically significant alloantibodies   + Infant <1000 gm selected on Cord Order   Screen should be ordered by the provider and added to the cord blood order if infant is < 1000 gm or otherwise is believed at high risk for blood transfusion   * Cord blood with positive DAT – reflex eluate only if cause of positive DAT is unexplained |
| **Repaneling Policy** | Repaneling should be performed in the following situations:   * + No previous ID by UWMC or last ABI > 3 months ago   + Current reactions don’t match the expected pattern of reactivity   + Increase in strength or reactivity   + All cells positive (NA if repeat warm auto receiving antigen matched units)   + AHG XM incomp. with antigen negative units   + Evidence of hemolysis |