**Purpose**

To describe the process for sending and resulting patient testing to the reference laboratories.

**Policy**

HMC Transfusion Services Laboratory (TSL) will use Bloodworks Northwest (BWNW) as the primary reference laboratory. Reference testing can be sent to additional outside facilities at the request of TSL Medical Director(s). Patients suspected of being on Anti-CD 38 or similar drugs (aka Daratumumab) will be sent to UW TSL for DTT treatment and testing.

**Process**

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| **Step** | **Action** | **Related Documents** |
| **Processing Immunohematology Reference Lab (IRL)** | | |
| **SENDING OUT** | | |
| 1 | Most often, samples are referred to BWNW IRL for further antibody identification testing after HMC TSL has performed preliminary testing.   * Order is entered in Order Entry. * TS Medical Director is the ordering physician for send out orders. * Testing is done in BOP, but further testing is required at BWNW. |  |
| 2 | If ABID results were completed at HMC TSL, result as usual.   * Tab down and add SOREF to the ABID results.   If no results were finalized by HMC, result ABID as SOREF.   * This will signify that the sample has been sent to BWNW IRL. | SQ Blood Order Processing |
| 3 | Complete BWNW testing form and IRL Consultation forms and arrange transport by calling appropriate transportation.   * Call BWNW reference lab to alert them to expect the sample. * *Note: If original sample is needed for phenotyping, aliquot into a tube and keep the original tube at HMC TSL.* | Immunohematology Consultation Request  Request for Testing Transfusion Services  Department of Laboratory Medicine Specimen Transport Plan |
| 4 | Send copies of preliminary testing (panel sheets, AG typing, etc.) |  |
| 5 | Document send out on the Antibody Identification worksheet |  |
| **MONITORING RESOLUTION PROGRESS** | | |
| 6 | Place TSL copy of the BWNW testing form in the hanging file by Bench A   * Every shift should check the fax machine and/or call BWNW asking for progress on the workup |  |

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| **RESULTING** | | |
| 7 | **Preliminary Report**   * BWNW IRL will fax the preliminary report when completed. * Enter the results directly into the BAD file or using PB in BOP: * Antigen typing * Antibody Identification results * Comments, if indicated * Review the BAD file entry: * Print BAD file report * 2nd MLS tech compares entry to preliminary report * 2nd corrects any entry errors, signs, dates and staples the BAD file print out to the preliminary report * Distribute the preliminary report: * Patient’s antibody folder (Review BAD file report attached) * Medical Director’s mailbox   Document on the Antibody Identification Worksheet | SQ Blood Order Processing  SQ Blood Order Processing Test Result Guide |
| 8 | **Final Report**   * BWNW IRL will fax the final report when it has been reviewed by a supervisor. * Compare to the patient’s BAD file:   + Review antigen typing and antibody identification entry   + Correct any entry errors made by TSL or changed results from BWNW. *An amended report may be required from BWNW.*   + Document any corrections with a BAD file printout and a QIM. * Distribute the final report:   + Patient’s antibody chart (include BWNW testing form from hanging file)   + Medical Director’s mailbox   + Compliance Analyst desk. *Report will be sent to the CAST group for charge entry and scanning into ORCA.* * Document on the Antibody Identification Worksheet. * Submit all reference testing request paperwork to the compliance analyst once the final report is in |  |
| 9 | **Processing Requests for HLA and Platelet Immunology**   * Physicians should contact BWNW for testing and sample requirements * TSL Medical Director approval required if request is made by TSL * SPS reference handles send out and resulting * Follow same process as above step 7 and 8 |  |
| 10 | **Genomics Testing Requests**   * Needs TSL Medical Director approval * Contact BWNW for sample requirements and paperwork * Follow same process as above step 7 and 8 |  |
| 11 | **Send out to facilities other than BWNW and UW TSL**   * At TSL Medical Director request and approval * Contact facility and determine appropriate sample requirements * Follow up on test results * Submit paperwork to Compliance analyst for billing resolution |  |

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| **Step** | **Action** | **Related Documents** |
| **Billing Reconciliation** | | |
| 12 | QA Compliance Analyst reconciles billing for all testing performed at outside facilities   * Sends billing charges reports to CAST team for subsequent billing adjustment * Sends final report to Medical Records to be filed in patients chart (ORCA) |  |
| **Reference Testing Results in ORCA** | | |
| 13 | TSL Medical Director(s) is responsible for the following;   * Transfusion Medicine Consult in ORCA   TSL Manager or designee is responsible for the following;   * Reviewing the preliminary and final report |  |
| **Sending samples to UW TSL** | | |
| 14 | Complete testing performed at HMC TSL in Sunquest. Add “DTT” test code on to TSCR order. |  |
| 15 | Keep original sample at HMC, aliquot ≥1.5ml plasma. Request additional sample collected if there is <1.5ml to send.   * If additional sample is needed. Order and perform ABSCR to verify reaction before sending. | Department of Laboratory Medicine Specimen Transport Plan |
| 16 | Contact MLS Lead at UW TSL and inform them there is a sample for DTT testing. Request one of their couriers to pick up sample. |  |
| 17 | Send copies of preliminary testing with sample. |  |
| 18 | Document send out on the Antibody Identification worksheet |  |
| 19 | UW TSL will perform testing and result in Sunquest. Billing is automatically attached to the test code. |  |
| 20 | Forward results to Medical Director for final consult. |  |

**References**

Bloodworks Northwest website <http://www.bloodworksnw.org/home/index.htm>