**Purpose**

To describe the standards set by the Harborview Medical Center Transfusion Service for the provision of products and services to its internal and external customers and patients.

**Policy Statement**

The Harborview Medical Center Transfusion Service will use every available means to ensure that the right test is performed on the right sample, the right results obtained, and the right product provided to the right patient at the right time.

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| **Service Standard** | **Supporting Process** | **Supporting Documents** |
| **Right Test** | * Reconciliation of Provider orders with Patient Historical Testing Results. * Comparison of Patient ABO/Rh and Antibody Histories with current results. |  |
| **Right Sample** | * Rigid enforcement of Two Patient Identifier verification by two Licensed Clinicians at the bedside. * Rigid enforcement of Patient Sample and Requisition (if required) verification by two Licensed Clinicians at the bedside. * Detailed inspection of the following prior to sample acceptance: * Presence of two phlebotomist signatures, dates and times on sample. Initials or Tech IDs are also acceptable. * Comparison of two patient identifiers on sampleand order (if required) to computer records for exact match.   *Note: It is acceptable to have a middle name on one and only a middle initial on the other, providing the middle name begins with the same letter used for the middle initial* |  |
| **Right Results** | * Daily Quality Control program for all Testing Methods. * Robust proficiency testing program for all analytes. * Comparison of results to patient historical records. * Rigorous Staff Training and Competency Program * Ongoing Quality Improvement System | CAP Accreditation  AABB Accreditation |
| **Right Blood Product** | * Contracts with FDA licensed, AABB accredited Blood Supplier. * Use of cGMP standards for component preparation and product modification. * Provision of Apheresis Platelet products to limit donor exposure. * Use of FDA licensed, rigorously validated Blood Bank software system to ensure ABO compatible products are issued. |  |
| **Service Standard** | **Supporting Process** | **Supporting Documents** |
| **Right Patient** | * Prior to Issue there is a rigorous Two-Person Read back and verification of the following: * Two patient identifiers * Patient ABO/Rh * Patient special requirements * Blood Product Type * Unit Number * Unit ABO/Rh, * Unit special attributes match patient requirements * Unit Expiration date * Interpretation of crossmatch tests if performed * At the bedside, prior to administration there is a Two-person Read back and verification of the following: * Two patient identifiers * Patient ABO/Rh * Patient special requirements * Blood Product Type * Unit Number * Unit ABO/Rh, * Unit special attribute match patient requirements * Unit Expiration date |  |
| **Right Time** | * Immediate response to Trauma page with the following products: * Six units of O RBCs * Six units of AB and or Low titer plasma * One dose of Platelets * 2-3 units of Low titer O whole blood * Response to Massive Transfusion Protocol * Continued immediate provision of un-interrupted supply of RBCs and plasma, supplemented with Platelets and Cryoprecipitate as requested. * Continued interaction with intentions to over-provide for patient needs, and to proactively continue that provision as long as indicated by medical staff. * TAT for Emergency Release of uncrossmatched products is 5 minutes. * TAT for STAT requests for crossmatched products ≤ 50 Min * TAT for Routine requests for crossmatched products ≤ 4 Hrs |  |