PROCEDURE

Title: Issuing Blood and Blood Products

Procedure #: 2015BLOODBANK69

Institution: Highlands Regional Medical Center

Address: 3600 Highlands Avenue, Sebring Florida 33870

Prepared by: Anita Smith Date: 6/12/2015

Title: Laboratory Administrative Director

Accepted by: _____ Date: 6/12/15

Title: Laboratory Medical Director

Date Patient Testing Implemented: 1/1/1999

Review of procedure every two years

Reviewed by: _____ Date: _____

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Reviewed by: _____ Date: _____

Discontinued testing date: _____

Highlands Regional MEDICAL CENTER

Policy Name: Issuing Blood and Blood Products **Department:** Blood Bank

Departmental Review: **Policy #:**

INITIATE DATE	DATE REVIEWED/REVISED	PAGE 1 of 4
1999	07/2013, 05/2014, 05/2015	

PURPOSE:
To assure that the proper clerical checks have been completed in order to provide the correct blood product to the correct patient and to record all pertinent data in the appropriate logs.

POLICY:
All checks are performed with the individual signing out the unit.

PROCEDURE:

1. To obtain a unit of blood or blood product, a member of the nursing staff must bring
   - a patient demographic label
   - a copy of the blood transfusion record from the folder in the laboratory
   - copy of the order to transfuse

   In an emergency, if the transfusion slip is not immediately available, a patient demographic label will be accepted. The patient demographic label is used to record the patient and unit by location in the Blood Usage Log.

2. The unit corresponding to the number on the transfusion record slip is removed from the Blood Bank refrigerator.

3. Patient History in SoftBank is checked. YOU MUST VERIFY THE FULL NAME AND IDENTIFICATION NUMBERS

4. The unit number, expiration and product type must match the data on the transfusion record slip, the patient unit label and Patient History in SoftBank. Units that outdate sooner should be used first.

5. The following information must be identical on the patient history card and unit tag:
   a. Name
   b. Identification number
   c. Band number
   d. Unit number
   e. Unit expiration date
   f. Patient blood type
   g. Unit blood type

6. The following information must be identical on the patient history, unit and patient unit label:
   a. Unit number
   b. Unit Type
   c. Unit expiration date

7. Check the compatibility certification on the requisition and SoftBank is complete. If any of these areas are incomplete or incorrect DO NOT issue the unit until the discrepancy has been resolved.

8. The Unit is observed for color and appearance before issuing. Record date, time and initial. Units with expired dates, hemolysis, grossly icteric color or turbidity due to bacterial contamination are unsuitable for transfusion and should be brought to the attention of the Laboratory Supervisor. If there is any question, DO NOT ISSUE BLOOD, until checking with the Laboratory Supervisor or Medical Director..

9. The individual signing out the unit must enter their full name with designation into SoftBank at issue. Only licensed health practitioners (RN, LPN, physicians) are allowed to receive blood from HRMC blood bank with the exception of OR personnel. A printed copy of the blood transfusion record form with the name of the individual sigining out the unit, the technologist initial and date and time of issue must be tagged to the unit before it is taken out of Blood Bank.

10. Remove pilot segments from the unit and attach a unit number label from the back of the unit to the segments and place them in the appropriate day container in the refrigerator. Always leave at least 2 full segments attached to the unit. Pigtails are kept for 10 days following crossmatch.

11. Place unit in biohazard bag and release to floor.

12. The transfusion slip is filed in the designated Blood Bank tray for review.

13. Confirm transfusion after 30 minutes or SoftBank will automatically confirm the transfusion after midnight.

REFERENCES:

AABB Technical Manual.

HIGHLANDS REGIONAL MEDICAL CENTER
Sebring, FL
Laboratory

DOCUMENT CHANGE RECORD

Document Name: Issuing Blood + Blood Products

Document Section: Blood Bank

Author: Kristel Rondeau

Please circle one of the following: NEW (REVISION) ARCHIVE

Effective

Description of document, changes, and rationale: Additional steps in identifying patient + exact blood order given attending/requesting physicians
Formal Training of staff required: None Attach email sent to staff about new procedures or changes to procedure if applicable
Method Validation required (attach documents): None
List any changes to the Lab Information system: None

Review and Approval	Signature	Date
Author	Kristel Rondeau	5.26.15
Chief Technologist		
Admin. Lab Director		
Laboratory Director		

Implementation occurs after signature by Laboratory Director.

Policy Name: Issuing Blood and Blood Products **Department:** Blood Bank

Departmental Review: **Policy #:**

INITIATE DATE 1999

DATE REVIEWED/REVISED 07/2013, 05/2014, 05/2015

Reviewed by	Reviewed Date	Reviewed by	Reviewed Date

Initial Implementation Date: _____

Reviewed by: _____ Date: _____
Department Supervisor

Reviewed by: _____ Date: _____
Department Adm. Director

Reviewed by: _____ Date: _____
Department Chief Technologist

Reviewed and Approved by: _____ Date: _____
Department Medical Director