

PROCEDURE

Title: Blood Unit Inspection

Procedure #: 2015BLOODBANK89

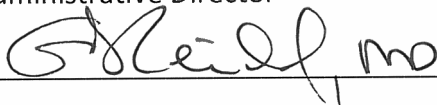
Institution: Highlands Regional Medical Center

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: 5/20/2014

Review of procedure every two years

Reviewed by: _____ Date: _____

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Discontinued testing date: _____



Policy Name: Donor Blood Inspection

Department: Blood Bank

Departmental Review:

Policy #: B3.13

INITIATE DATE

DATE REVIEWED/REVISED
05/2014

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PURPOSE:

To provide safe, uncontaminated blood products to patients, units of blood will be inspected daily for signs of contamination or deterioration.

POLICY:

HRMC documents examination of blood daily and quarantines any questionable units.

PROCEDURE:

1. All units in the blood bank storage refrigerator will be examined daily during storage and immediately prior to issue.
2. Blood will be rejected for transfusion if the color or physical appearance is abnormal or if there is any suspicion of contamination. Contamination is suspected if the blood has a purple color, if a zone of hemolysis is observed just above the cell mass or if clots are apparent. Other obvious features that can make blood unsuitable for transfusion are purple, brown or red plasma. Green plasma may be the harmless manifestation of the use of oral contraceptives. Inadequate sealing or closure renders the units suspect and unsuitable for transfusion.
3. Blood units, which are questionable for any of the above reasons, should be quarantined until their disposition is decided. Attach a note to the unit stating that it is quarantined, the date and reason. Place in the bottom left hand drawer of the Blood Bank refrigerator in the section labeled quarantined units.
4. Before placing the unit in the refrigerator, gently invert the unit several times to mix the cells and plasma, since a great deal of undetected hemolysis, clotting, etc. may have taken place within the red cell mass. Place in refrigerator as described above, observe the unit after sedimentation has taken place, if the blood no longer appears abnormal, it may be returned to the available blood supply. Document this in the disposition log.
5. A signed record of the daily inspections is maintained in the Blood Bank as part of the Daily Quality Control Procedure. Any units found to be abnormal will be quarantined and logged in the disposition log, showing the date and description of any abnormal findings, along with identification of the suspect



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units and action taken. The facility that issued the component in question will be notified of the conditions.

6. Abnormal blood that cannot be release for transfusion should be investigated and the abnormality recorded, before it is disposed of in a biohazard container. At times, the issuing agency may request that the unit in question be returned to them; in this case the unit will be clearly labeled as "quarantined, suspected contaminated unit" placed in a ziplock biohazard bag and returned by courier. Log this return in the disposition log.
7. All blood unit and blood products received from One Blood must be entered in the SoftBank Inventory Log. Retype is ordered and performed as per HRMC policy. A retype label must be attached to the blood unit.

REFERENCES:

AABB Technical Manual 15th edition, 2005:



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Reviewed by	Reviewed Date	Reviewed by	Reviewed Date
<i>[Signature]</i>	5-28-15		
<i>[Signature]</i>	5-29-15		

Initial Implementation Date: _____

Reviewed by: *Christell Pordel* Date: 5-19-14
Department Supervisor

Reviewed by: *Angela Lanster* Date: 5/19/14
Department Adm. Director

Reviewed by: _____ Date: _____
Department Chief Technologist

Reviewed and Approved by: *G Meisner* Date: 5/20/14
Department Medical Director