PROCEDURE

Title: Disaster Plan for Blood Bank

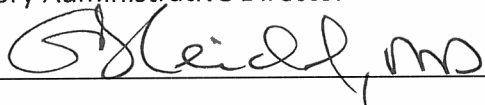**Procedure #:** 2015BLOODBANK92

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: _~~GSleidl, MD~~_____ Date: _6/12/15_____

Title: Laboratory Medical Director

Date Patient Testing Implemented: 9/25/2009

Review of procedure every two years

Reviewed by: _____   Date: _____

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Reviewed by: _____   Date: _____

Reviewed by: _____   Date: _____

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Reviewed by: _____   Date: _____

Reviewed by: _____   Date: _____

Reviewed by: _____   Date: _____

Discontinued testing date: _____

Policy Name: HRMC Blood Bank Laboratory Disaster Plan

Department: Blood Bank

Departmental Review:

Policy #:

INITIATE DATE

DATE REVIEWED/REVISED
09/25/2009, 04/06/2015

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PURPOSE:

The cornerstone of an effective disaster management program is a thorough risk assessment of the known hazards that can affect the organization. Potential hazards that are generated externally include natural events such as earthquakes, floods, wildfires, pandemics, and hurricanes as well as human events such as terrorism, or industrial accidents, including chemical and hazardous materials and nuclear power plant emergencies. Another potential hazard to consider involves internal events such as fires, natural gas leaks, workplace violence and hazardous spills.

A disaster may result in an increased demand for blood and blood products. It is therefore imperative that immediate action is taken so that an adequate supply of blood will be available.

POLICY:

It is the responsibility of HRMC blood bank department to provide blood and blood products to meet emergency needs in the event of a disaster (internal or external).

PROCEDURE:

1. Quickly assess the facilities blood inventory. Call OneBlood if more blood product is needed.
   Tel: 407-226-3811   **Fax: 407-226-3815**
2. Deliver HRMC blood inventory list to the Command Center. The inventory list notifies the Command Center of the available O Negative blood units for emergency release.
3. Notify the following personnel:
   - Medical Director   ext. **5503**
   - Laboratory Director   ext. **5174**
   - Chief Technologist   ext. **5284**
   - Engineering Services   ext. **5844**   bpr. **863-219-1237**   tel. **863-381-7871**
   - Risk Manager   ext. **5534**   bpr. **863- 219-1538**
   - HRMC courier (Heartland Courier Services)   tel. **863-414-0039**
     NOTE: courier must be on standby for emergency delivery or transport of specimens and blood products.
4. Additional staffing may be needed in blood bank.
5. Prepare labeled segment tubes for anticipated crossmatch order.
6. Follow standard procedures for compatibility testing and use of uncrossmatched blood. All specimens must have blood bank ID system with two unique identifiers.

7. NOTE: Blood Bank prefers to give type specific blood, especially in an emergency when large amount of blood may be needed; O Negative blood should be reserved for life threatening situations.
8. If blood is needed before completion of crossmatch, an emergency release form must be used. If the patient is in the system issue the unit via "Emergency Release" in SoftBank.
9. If patient is not in the system a manual Emergency Release Form can be used. Use the downtime log sheet to record pertinent patient information. This data will then be reconciled by the blood bank supervisor later on.
10. Stay abreast of the Emergency Room situation as much as possible to be ready to meet their blood needs.
11. In the event of an internal disaster, it is possible that the Blood Bank will need to acquire an alternate space and possibly relocate equipment and supplies. If there is power loss and an emergency power failure, blood products must be placed in a cooler and temperature monitored every 4 hours (EMERGENCY BLOOD STORAGE TEMPERATURE LOG).

PROCEDURE NOTES:
- If the community is faced with biological attack with infectious agent(s), the issues of facing blood collectors and hospitals regarding the potential impact on the blood supply and medical needs will not necessarily mirror those that arise following other types of suitability, a biological attack may substantially limit the blood supply. The impact on the donor population will depend on which biological agent is involved in a disaster. The spread of certain agents may require immediate deferral policies.
- In the event of a biological attack, our supplier should estimate the number of donors who will be deferred and scope of expected shortages resulting from such deferrals and communicate needs will be met by prioritizing the most urgent needs first.
- Always refer to OneBlood Disaster Plan (Florida Blood Centers Blood Bank Disaster Plan).

REFERENCES:
- AABB Technical Manual; 26th ed. 2009
- Florida's Blood Center Disaster Management (OneBlood Inc.)

Highlands Regional MEDICAL CENTER

HIGHLANDS REGIONAL MEDICAL CENTER
Sebring, FL
Laboratory

DOCUMENT CHANGE RECORD

Document Name: HRMC Blood Bank Laboratory Disaster Plan

Document Section: Blood Bank

Author: Maristel Portunle

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

Effective

Description of document, changes, and rationale: updated information	
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:	

Review and Approval	Signature	Date
Author	Maristel Portunle	4-8-15
Chief Technologist		
Admin. Lab Director		
Laboratory Director		

Implementation occurs after signature by Laboratory Director.

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