Regional Medical Center®

Standard Operating Procedure

SUBJECT: Transfusion Reaction Workup			
ORIGINATION DATE:	February 2025	**PREPARED BY:**	**APPROVED BY (If Applicable):**
LAST REVIEWED:	February 2025	Lab	

PROCEDURE:

1. The provider will initiate the Adverse Transfusion Reaction Protocol.
2. Nursing will print off the “Potential Transfusion Reaction Report Form” (Form imprint #1070)
    a. Nursing is to complete clerical check at patients bedside and complete portions A & B.
3. Lab will be notified of ANY adverse reaction regarding blood administration
    a. If urticaria is the only adverse reaction noted, blood administration may be resumed.
    b. Lab staff will enter any reactions to blood administration into the Blood Bank comments in “Patient Product Inquiry”
4. Immediately after notification, Lab staff must collect a post-transfusion specimen to include:
    a. Blood Culture
    b. 1 Sodium Citrate tube (Blue)
    c. 3 No Gel red top tubes
    d. 1 Sodium heparin Tube (Green)- For flow cytometry
    e. 2 K2 EDTA Tubes (Pink)
5. Label all tubes with patient information stickers with Date, time and initial on tubes. If possible add Post Transfusion to the sample
6. Lab staff will do a clerical check on:
    a. Donor unit
    b. Label
    c. Paperwork
    d. Patient samples
7. Complete Clerical Check under lab investigation portion of report form.
8. Check donor unit and saline tubing for hemolysis or discoloration.
9. On Pre-Transfusion sample:
    a. Repeat ABO/Rh
10. On Post-Transfusion sample complete:
    a. ABO/Rh
    b. DAT
        i. If DAT is positive, perform a DAT on Pre-Transfusion sample
    c. Antibody Screen

11. Complete a urinalysis on specimen collected after adverse transfusion reaction was called.
12. Document all appropriate information on “Potential Transfusion Reaction Report Form”
13. Once all testing is complete, Call the pathologist for review
    a. If potential reaction workup is after hours, Call the on call pathologist
14. Document the pathologist that was contacted, write their verbal review, date and time on form.
    a. If necessary, the pathologist will order additional testing on the patient
    b. Complete a paper Lab/RT Order form as Telephone Order (T.O.) with tests indicated with appropriate diagnosis
    c. Order tests in Cerner as a T.O. and place paper order in pathology box for signature
15. Enter Results in Cerner:
    a. Clerical Check information (TR Information 1)
    b. Pre-Transfusion ABO/Rh (.PreTR ABO/Rh)
    c. Post Transfusion ABO/Rh (.PostTR ABO/Rh)
    d. Post Transfusion DAT
    e. Post Transfusion Antibody Screen
    f. Pathologists verbal review (TR interpretation)
        i. **DO NOT** verify this information, select perform until pathologist can review documentation of transfusion and sign form.
        ii. Once pathreview is final, enter results and finalize in Cerner.
        iii. Place the completed “Potential Transfusion Reaction Report Form” (Form imprint #1070) in HIM box to be scanned into the chart
16. All Fatal transfusion reactions shall be reported to the FDA. The Blood Bank supervisor will review and correspond the necessary information to the FDA. See “Reporting Transfusion Fatalities to the FDA SOP”
17. Notify the blood supplier when a transfusion fatality or serious complication occurs due to the manufacturing process of the product, or if the reference lab has performed specialty testing on components.
18. Fill out Transfusion Reaction Investigation Form and send patient samples, 2 donor unit pigtails and form to lifeserve.