**Blood Bank Staff Meeting 1.3.24**

1. **Receiving materials & reagents (we must check for discrepancies):**
   1. Staple the invoice from the hospital to the manufacturer’s invoice inside box.
   2. Initial and date whatever invoice you have stapled on top.
2. **INC vs. No Ab Det:**
   1. Do not use No Ab Det.
      1. System will not stop you and ask you to perform a full crossmatch.
   2. Always use Inconclusive.
      1. System will stop you and ask you to perform a full crossmatch.
3. **Enter original, discrepant results and not the final, resolved ABO:** 
   1. The system MUST capture what the discrepancy was so that next time the same discrepancy is seen, we would know how we resolved it.
4. **Irradiated product requests:**
   1. Anything other than Leukemia will require a **PATHOLOGIST’S** approval before updating PPI to give irradiated products.
   2. PPI should indicate *why the patient needs irradiated products*.
   3. If it’s on an off shift, leave detailed info for 1st shift to f/u with path on-call the next day (no need to page on-call in the middle of the night). Don’t withhold the blood or get in an argument; leave us the info to follow up the next day.
5. **Returning Products:**
   1. Do not return products unless physically available.
6. **EP forms:** 
   1. Never receive an EP form back without a signature, even if blood was not used.
   2. A signature is required to document WHO requested products.
   3. Always get the name of the physician requesting emergency blood or EP, and document it in PPI.
7. **Crossmatch for Emergency Release:** 
   1. Remember to do IS XM as soon as you can when issuing emergency units to patients without a T/S or a one-tube process.
   2. Do not wait for a 2ABO or for the units to be returned.
      1. ACCEPT THE OVERRIDE THAT THE UNITS ARE ISSUED.
8. **Inventory Correction:**
   1. When making inventory corrections, add a comment to say what is being corrected/that sickle testing was done in heme.
9. **Platelet Standing order:**



* 1. Do not leave plt standing order pending if they don’t have Rh neg. We can make a supplemental order if we need Rh Neg for a specific patient.

1. **OR Schedule Screen:** 
   1. Ensure the OR schedule is minimized on the front terminal unless you are actively using it. A runner blatantly looked at the screen; this is a HIPAA violation.
2. **Testing Methodology:** 
   1. All antigrams MUST HAVE a methodology.
3. **Yellow Slips**
   1. DO NOT ACCEPT FORMS WRITTEN IN PENCIL
   2. Forms should have the actual number of units requested, not just a



* 1. 3rd Shift: Double check the date when issuing close to midnight. Found a few of forms this month with the wrong date of issue on the yellow slip… this has never been an issue before.

1. **3rd Shift:** 
   1. Please attach your expired products report to your wastage form.
   2. They need to be reviewed concurrently to ensure we don’t miss anything.
2. **Communication:** 
   1. Vision errors
   2. Testing issues
   3. Pending tests
   4. Equipment issues
3. **Antigen Typing:** 
   1. Perform using MANUAL tube method ONLY.
      1. DO NOT use buffer wells of the ABD cards to perform any antigen typing.
      2. This is NOT our protocol.
4. **Receiving specimen with incomplete collection:**
   1. If you see that the collection was not completed in Cerner when login in a sample, you can put “SYSTEM” in the collector ID, so your credentials don’t show as the person who collected the sample.
5. **Pending Log:** 
   1. Check the pending log periodically during your shift.
6. **ERGO Break:** 
   1. See flyer attached.
   2. Take micro-breaks (30-60 seconds) to offset musculoskeletal strain from sitting computer work, microscopy, and various lab tasks.
      1. Stand up and move around.
      2. Keyboard palm rests for computer stations are available upon request.
      3. Footrests are also available upon request.
7. **Online Academic Opportunities:** 
   1. See flyer.
8. **FDA reportable event/ IQEs/OnPoints:**
   1. 2 FDA reportable event
      1. A unit was returned in a cooler with the temperature of 11C. Unit was accepted in the inventory and was released to the patient for transfusion. Unit was transfused without complication and no sign of sepsis was noted.
      2. A unit was released to the patient before an antibody workup was completed.
      3. 3 Discrepant Information specimens and 1 WBIT.
9. **Omni:** 
   1. If you cannot reach Omni via 610-644-7209, please call 267-252-4256.
10. **Policies in MediaLab:** 
    1. Review and sign off on any policies that are in your queue in MediaLab.
    2. Specimen Receipt and Accessioning policy has been updated. Please review and sign the paper located near Bench 1.
11. **Inspection:** 
    1. We are currently in our inspection window. If a call is received from the inspector, you must notify the supervisor via phone call and not via text.
    2. The inspection will be unannounced, and the inspector will call 1 hour before arriving.
12. **Pathologist on call for blood bank:** 
    1. Dr. Bala is back, and she is now on-call 24/7 for the blood bank.
13. **Transfusion Reaction:** 
    1. Day shift and second shift must notify the pathologist of any transfusion reactions on their shift.
    2. Night shift is the only shift who will not make a call unless products are requested.
14. **Recognition:** 
    1. Thank you to everyone who has helped cover the gaps on dayshift, second shift, and night shift. Mary and I appreciate your help! 😊