## TITLE: Policy for Dispensing Blood Products Utilizing a Secure Transaction

**PRINCIPLE**

Blood products for patients are delivered through the translogic tube system using a Special Function - Secure Transaction Mode.

CLINICAL SIGNIFICANCE

Blood products are delivered in the tube system to patient care areas within 2 minutes or less. Use of the Secured Transaction Mode gives priority over other tube system functions and ensures constant tube tracking from the Blood Center to arrival on the floor.

**PERSONNEL**

Medical Technologist

### EQUIPMENT

Translogic Tube System

4” Carrier

Zip Loc Plastic Bag

### STEPWISE PROCEDURE

1. A tranfuse blood products order will be placed in the hospital computer system which

will generate a transfusion order requisition in the Blood Bank. Signed downtime requisitions from OR will also be accepted for all blood products.

 **NOTE: No units will be released to the floor without a patient transfusion order**

2. A Blood Bank Transfusion Request slip will arrive in Lab via the tube system.

A request slip is required before blood products are tubed. The slip must be marked to indicate patient identifiers, which product is required and patient location.

3. Perform electronic crossmatch, if indicated

4. Take unit from the refrigerator with Transfusion Label attached.

5. CHECK: Patient’s name

 Blood Type

 Donor Number and type

 Expiration Date

 Color and Appearance of Unit

 Any Special Requirements have been confirmed

 Unit is negative for antigen corresponding to patient antibodies

NOTE: In the case where the patient name, blood type or donor number don’t agree between slip and unit or the unit is expired, the unit cannot be

 released for transfusion. A different unit crossmatched for the patient should be released or if none are available, an additional unit should be crossmatched.

6. Dispense unit to the floor using the Soft Bank Inventory Issue Application.

 See BB LIS Manual for more information.

7. The technologist checks the outdate, color and appearance of the unit before releasing it to the floor. Units should be inspected for bag integrity, hemolysis and clots. Comparison of the bag color and the segment color as an aid in detecting bacterially contaminated units should also be performed. Plasma color and transparency must be observed. The interface between red cells and plasma is to be inspected for hemolysis and evidence of bacterial growth. Units of frozen components must be inspected for evidence of prior thawing/refreezing and broken containers. Platelet components must be inspected for evidence of bacterial growth and grossly visible platelet aggregates. If any of the above stated parameters are inappropriate, the unit may not be released for transfusion. Place an O.K. in the visual inspection box during dispense to document this checking.

**NOTE: Only one unit may be signed out at a time to the Emergency Room or the floors, EXCEPT UNDER EMERGENCY CONDITIONS, when more than one unit at a time may be required. Multiple units can be sent to the operating room as they have a monitored refrigerator for storage.**

8. Place the Blood Bank Transfusion Request in the box.

10. Remove 2 segments and place in weekly bag on blood bank counter.

11. Affix a Hemo Temp II sticker to Red Blood Cells units.

12. Call the floor and give them the security code (current time) needed

 to release the unit from system at the time of arrival.

14. Place the unit in a biohazard bag and seal.

Unit is to be dispatched in a plastic zip-loc bag before loading the carrier. Each carrier has a one-liter capacity. [1 Whole Blood; or 2 RBC; or 2 Fresh Frozen Plasmas; or 1 Platelet pheresis; or 10 random Platelets] Close lid securely.

15. Place carrier in the dispatcher.

16. SCAN BADGE

17. Press DIRECTORY TO FIND LOCATION/OR ENTER LOCATION.

18. Select LOCATION.

19. Press SEND SECURE

20. Press STANDARD SECURE (Enter security code)

21. Press SEND/ENTER. [SELECTION ACCEPTED PLEASE WAIT, TRACKING AND STATION NUMBER] message will appear.

22. To release the unit on the receiving end, the nurse must enter the security code given by the Blood Bank within 10 minutes from the time of the initial call. If longer than 10 minutes, the nurse must call maintenance to activate the release of the unit.

RBC, WB, frozen plasma, platelets, and cryoprecipitate are all signed out in the same manner.

When the tube system is inoperable, blood delivery is resumed by the Nursing Department.

In case of tube system failure, Facilities Management must be notified as soon as possible.

(Ex 4444 or pager @70-044).

**Note:** For any products being sent to the Operating Room other than open hearts in OR 10 please attach a downtime transfusion tag printout: Inventory > Product Order Service > Print. You will print by patient name and select units to print tags for.

**Laser Lead Extraction/Pacemaker Procedures Done in Cath Lab**

* When orders for this procedure are received in the lab it is often for 4 units of blood.
* When a pink slip is received 2 units are to be sent to OR to be stored in the refrigerator.
* 2 units are to be packed in a cooler and picked up by Cath Lab staff prior to the start of the procedure. Units are to be packed in our standard way of ice pack on the bottom, layer of bubble wrap, units in biohazard bag, bubble wrap with an ice pack on top. Cooler still outdates 2 hours from time of issue, but units are acceptable for return if the Hemotemp flower is still blue with an in range temperature displayed on the sticker.

### REFERENCES

AABB Technical Manual, 16TH Edition, 2008

Standards for Blood Banks and Transfusion Service 25TH Edition, 2008

Translogic Tube System, 1995

Rush Copley Medical Center Nursing Policy