

#### Indiana University Health

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#### **Components Received from Other Institutions -**Handling

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#### I. PURPOSE

To describe procedure to receive blood and blood components from suppliers.

# II. SCOPE

This procedures starts after blood and blood components have been delivered to the intended Transfusion Service and before units are entered into the computer system.

Section: 1 – 5	Section: 6	Section: 7 – 8
All staff trained in receiving blood and	Technologists	All staff trained in receiving blood and blood
components.		blood components.

## **III. EXCEPTIONS**

Exceptions must be approved by the Blood Bank Physician

#### **IV. DEFINITIONS**

None

## **V. POLICY STATEMENTS**

None

## VI. PRINCIPLE / BACKGROUND

None

## **VII. SPECIMEN REQUIREMENTS**

None

#### VIII. PROCEDURE

- 1. Inspection of Shipping Conditions: (All staff trained in receiving blood & blood components.)
  - 1. Inspect shipping containers and blood components to insure that the following are met:
    - 1. Components stored at 1 to 6 C are shipped in wet ice.
    - 2. Frozen components are shipped in dry ice.
    - 3. Platelets and Granulocytes are shipped at 20 to 24 C.
    - 4. Containers are intact.
    - 5. Labels are complete, affixed, legible.
  - 2. Indicate on the packing list or invoice **DATE**, **TIME** received, **TECH** initials (or number) and interpretation **"OK"** to indicate shipping conditions have been met.
  - 3. When shipping conditions have not been met as outlined above, notify supervisor or designee and Shipping Facility of the situation as soon as possible for proper disposition of products.
    - 1. Quarantine product until resolution has been determined.
    - 2. Indicate on packing list or invoice the reason conditions have not been met.
    - 3. When indicated, follow procedure outlined by the individual supplier involved when returning blood products. **See SOP** <u>Packaging Blood/Components for Shipping</u>.
- 2. Inspection of Blood and Blood Components: (All staff trained in receiving blood & blood components.)
  - 1. Remove blood components from shipping containers and inspect each blood component to ensure the following are met:
    - 1. Blood container labels are legible, affixed and contains:
      - 1. Unit number (Whole Blood Number or Donation Identification Number [DIN]).
      - 2. ABO and Rh Label
      - 3. Expiration Date
      - 4. Product Code and Description
      - 5. Supplier Identification
    - 2. Components are not expired.
    - 3. Blood container closure has not been disturbed.
    - 4. Blood container is intact (eg. no sign of leaks).
    - 5. At least one sealed segment of integral donor tubing has remained attached to the container.
    - Leukoreduced Packed Red Blood Cells (LPCs) components should contain at least 8 sealed segments.
    - 7. LPCs are not hemolyzed.
    - 8. Frozen components do not show sign of thawing.
    - 9. Platelets do not show visible aggregates.
  - 2. When conditions have not been met as outlined above, notify supervisor or designee and Shipping Facility of the situation as soon as possible for proper disposition of products.

- 1. Physically quarantine product until resolution has been determined.
- 2. Indicate on packing list or invoice the reason conditions have not been met.
- 3. If indicated, follow the procedure outlined by the individual supplier involved when returning blood products. **See SOP** Packaging Blood/Components for Shipping.
- 3. Verification of Shipment and Storage: (All staff trained in receiving blood & blood components.)
  - 1. Compare Unit number on each component against packing list or invoice.
  - 2. Place a mark, such as a check ( ✓ ) on the packing list by the unit number to indicate the product has been received.
  - 3. Place a "short dated" sticker on red cell products expiring in less than 1 week.
  - 4. Note any discrepancies on the packing list and notify the supervisor or designee of any discrepancies.
  - 5. When not entered into the computer system immediately (See Section 4.0 this SOP), store blood components in the designated location and at the appropriate temperature:
- Entry of Blood Products into the Computer system: (All staff trained in receiving blood & blood components.) CAUTION: Check Cerner "INVENTORY AREA" and "SUPPLIER" fields are correct for appropriate Cerner site.
  - Enter red cell products. NOTE: After entry, components must stay in Holding Refrigerator until Donor Retyping has been completed (see Section 6).
  - 2. Enter plasma products including:
    - 1. Cryoprecipitate
    - 2. Frozen or Fresh Frozen plasma
    - 3. Plasma-cryoprecipitate reduced (Cryo-poor plasma)
  - 3. Enter Platelets:

NOTE: All Platelets must be Irradiated and **Modified** with "Irradiated" attribute after irradiation has been completed and QC is acceptable.

- 4. Autologous/Directed Donor LPCs:
  - 1. Cerner Computer Applications:
    - 1. Patient Product Inquiry (PPI)- Retrieve Medical Record Number (MRN)
      - 1. Click on demographic ellipsis.
      - 2. Enter patient social security number (SSN) in appropriate location.
      - 3. When SSN not available, use patient name and date of birth to verify patient ID.
    - 2. Receive Products-Enter product into inventory:
      - 1. Under "Product type:" enter "Auto blood" or "DD component".
      - Press Add button when all donor information entered Autologous/Directed Association box opens.

**NOTE:** You can also access the Autologous/Directed Association box by clicking on patient ellipsis in Receive Products screen **before** pressing **A**ddbutton.

- 1. Click on patient ellipsis-enter MRN and expected date of usage.
- 2. Close.

- 3. SAVE, if all information is correct.
- 3. Return to PPI Verify association of unit with patient.
  - 1. Enter MRN.
  - 2. First "alert" button should be RED.
    - 1. Click on button.
    - 2. Verify unit information is correct when box opens.
- 4. If unit not properly associated with patient go to Correct Inventory and repeat process.
- 5. When MRN not available:
  - 1. Enter Auto/DD unit into inventory without associating MRN.
  - 2. Call Dr's. Office for MRN.
  - 3. Place paperwork in designated area to be checked periodically until MRN available.
- 2. Blood Center Packing Slips:
  - 1. Required Documentation:
    - 1. MRN.
    - 2. Date of need.
    - 3. Doctor's name.
  - 2. Place in designated area for follow-up.
- 3. Place Autologous/Directed Donor unit on designated shelf for retyping.
- 5. Storage of Blood Products: (All staff trained in receiving blood & blood components.)
  - 1. Once products have been entered in Cerner and processing complete, they may be stored and made available for general inventory as follows:
    - 1. Frozen plasma products (-18 C or colder).
    - 2. Platelets (20 to 24 C) with constant agitation.
    - 3. LPCs may be stored at 1 to 6 C and made available for general inventory once ABO and Rh (for Rh negative) Groups have been confirmed.
    - 4. "Red Tagged" (emergency or special release) blood\blood components: place in appropriate designated quarantine storage area.
- 6. Confirmation of ABO and Rh Group: (Audience: Technologists.)
  - 1. Test Group A, Group B and Group AB red cells against anti-A and -B sera using the slide method, Galileo or ECHO.
  - 2. Test Group O red cells against anti-A,B or equivalent (anti-A and B) using the slide method. (Galileo / ECHO requires Anti-A and Anti-B testing)
  - 3. Test Rh neg red cells against anti-D sera using the tube method, Galileo or ECHO, (confirmation of Rh Positive cells is not required).

NOTE: Testing for the expression of weak D (D<sup>u</sup>) is not necessary. However, Galileo and ECHO automatically test for "D" Antigen.

4. Record results and interpretations using Cerner, "Result Entry", and "Product Number" format Worksheet. Galileo and ECHO results may be transferred by interface when appropriate.

- Once ABO and Rh are confirmed, store products (segregated by Blood types) in general inventory or Directed / Autologous (1 to 6 C) inventory.
  NOTE: It may be necessary to return products with discrepancies. ABO and Rh discrepancies must be resolved prior to making the product available for general distribution.
- Follow procedure outlined by the individual shipping facility involved when returning blood products. See SOP Packaging Blood/Components for Shipping.
- 7. Segment Storage for all LPCs (all staff trained in receiving blood & blood components).
  - 1. Purpose: Provide representative sample of each LPC, should a Transfusion Complication Investigation be required up to 8 days after last possible transfusion event.
  - 2. STORAGE Period: 50 days from Receipt.
    - Using Biohazard Zip-Lock storage bag. NOTE: One Dated Zip-Lock bag will be used for each calendar day.
    - 2. Write receiving date on Zip-Lock bag, in large numbers (MM/DD/YY).
    - 3. Remove ONE Segment from each LPC.
    - 4. Remove One Unit Number or DIN from each LPC.
    - 5. Affix (firmly) One Unit Number or DIN to each respective segment from each product.
    - 6. Place Segment into "Daily" Zip-Lock bag.
  - 3. Midnight each day, place "Daily" Zip-Lock bag into designated storage refrigerator.
  - 4. Periodically discard entire bag, with contents, when 50 day storage limit is reached.
- 8. Precautions: (All staff trained in receiving blood & blood components.)
  - 1. It is important that products are stored at appropriate storage temperature as soon as possible.
  - 2. When a delay in storage of products is anticipated, entry into Cerner and testing (confirmation of ABO and Rh Group) must be performed in a manner to insure that products are not out of proper storage for extended periods.
  - 3. Frozen products must not be allowed to thaw.
  - 4. Refrigerated products (1 to 6 C) must not be allowed to remain at room temperature (20 to 24 C) for more than 25 minutes.

#### IX. APPENDICES/ATTACHMENTS/FORMS/ LABELS

None

#### X. REFERENCES/CITATIONS

Quality System, AABB/IU Health.

AABB Technical Manual, current edition. AABB Standards, current edition.

#### Policy #:

BBCP - 010