



Deviation From SOP

Date: 6/18/23

Affected SOPs: Inventory Forms for UH, MH and RH with Inventory SOP for BB

Description:

Use the attached drafted documents for inventory at MH, UH, and RHBB with revised SOP for Inventory. The reason for the quick implementation is due to the cut off of the pneumatic tube system for the MHBB from RH and UHBB.

Summary of Changes:

Implement attached documents for use in the lab.

This deviation will allow us to use these documents to verify shared team members, before finalizing the procedure and forms in PolicyTech.

Implementation of Change

Update to the draft SOPs attached, will be implemented by July 2023 in PolicyTech.

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Approved By: BB Medical Director



Indianapolis, IN 46202

Methodist Daily Inventory

Date: _____ Inspected/Ordered By: _____

- Daily:** Evaluate/organize products by outdate. Remove/dispose any expired products. During evaluation, remove any questionable units.
- Count the inventory listed.
- Compare the **Total Units Counted**, **Minimum Inventory** to the volumes to be received on the **Standing Order**. If the amount to be received is greater than the products needed, then don't order any additional. If the amount to be received is less than the amount of products needed, then place an order with the blood supplier.

BLOOD TYPE	Current Counted LPC	Current Counted IRR LPC	Current Counted Pheno Units	Total Units Counted	Minimum Inventory Level	Volume Expected from Standing Order	Replacement Volume to Order from Supplier	Special Products and Emergency Units MTP Tray = 6 LPC Emergency Release Tray = 4 LPC or TP products		
								Emergency Set UP	Required Products Set Up	If Okay = √ If replaced = R
O Pos										
O Neg								MTP Adult: (O+) 2 Trays with LPC	O+Tray 1 O+Tray 2	
A Pos								**MTP Adult: (O-) 1 Tray with LPC	O- Tray 1	
A Neg								**Surgery (O Neg) Emerg. Release Ck Pink forms to determine inventory	4 O Neg LPC	
B Pos								In date ER Trays – Ck Pink forms to determine inventory	1=O- Tray 1=O+ Tray TP Tray 1 TP Tray 2	
B Neg								In date ER Trays – Whole Blood Ck Pink forms to determine inventory	8 WB Total O+ or O-	
AB Pos								Whole Blood Used in Trauma Liquid Plasma Lifeline Usage, Replaced on Wed Standing Order	Current Counted WB	Current Counted LP
AB Neg								Lifeline 1 Tray with LPC	O- Tray	

Platelets	Current Counted	Minimum Inventory Level	Requested Replacement of Platelets
CMV and Non-CMV Negative		General Inventory Level	

	Current Counted TP	Min. Inv. Level	Volume to Restock	Current Counted FFP	Restock Level for FFP	General Inventory Level	Volume Expected from Standing Order	Volume to Restock	Current Counted Pooled CRYO	Restock Level of CRYO	General Inventory Level	Volume to Restock
O												
B												
A												
AB												



Riley Blood Bank - Daily Inventory

Date: _____ Evaluated /Inspected/Ordered By: _____

- Daily:** Evaluate/organize products by outdate. Remove/dispose any expired products. During evaluation, remove any questionable units.
- Count the inventory listed.
- Compare the **Total Units Counted, Minimum Inventory to the volumes to be received on the Standing Order.** If the amount to be received is greater than the products needed, then don't order any additional. If the amount to be received is less than the amount of products needed, then place an order with the blood supplier.

BLOOD TYPE	***Count Inventory only AFTER MHBB and UHBB INVENTORY filled*** UF = <5 days old and CMV negative Fresh = < 8 days old and CMV negative IF less than 0, indicate 0 or leave blank					Total Units Counted	Minimum Inventory Level	Volume Expected from Standing Order	Replacement Volume to Order from Supplier	Special Products and Emergency Units MTP Tray = 6 LPC Emergency Release Tray = 4 LPC		
	Immediate Use Fridge	Irradiated	CMV Neg	LPC	Pheno							
O Pos												
O Neg										Emergency Set Up	Required Products Set Up	If Okay = ✓ If replaced = R
A Pos										Pediatric Unit 1 Unit (O Neg) CMV-, IRR < 14 days	1 LPC	
A Neg										MTP Pediatric >40Kg: (O-) 1 Tray with 6 LPC No age requirement	6 LPC	
B Pos										MTP Pediatric >17kg to 40kg 4 units (O Neg) < 14 days	4 LPC	
B Neg										MTP Pediatric <=17kg or <= 38 lbs 2 units (O Neg) < 8 days	2 LPC	
AB Pos										Whole Blood and Liquid Plasma LP Riley ER and OR Replaced per SOP <i>Cannot order from blood supplier</i>	Current Counted WB	Current Counted LP
AB Neg												
Pediatric O Pos	UF			Fresh								
Pediatric O Neg	UF			Fresh								
Pediatric A Pos	UF			Fresh								
Pediatric A Neg	UF			Fresh								
Pediatric B Pos	UF			Fresh								

Platelets	Current Counted	Inventory Level	Volume Expected from Standing Order	Ordered Volume from the Blood Supplier IF less than 0, indicate 0 or leave blank
O, A, B, AB	CMV Neg PRT			
AB Pedi (CMV Neg/PRT)				

	Current Counted TP	Min. Inv. Level	Replacement and restock	Current Counted FFP	Min. Inv. Level	Volume Expected from Standing Order	Replacement and restock	Current Counted Pedi FFP	Min. Inv. Level	Replacement and restock	Current Counted Single CRYO	Min. Inv. Level	Replacement and restock	Current Counted Pooled CRYO	Min. Inv. Level	General Inventory Level	Replacement and restock
O											4	*****		6			
B											4	If <4-8 then RH staff will order in ARC Connect		6			
A											4			6			
AB								8-10			4			6			



University Daily Inventory

Date: _____ Inspected/Ordered By: _____

1. Evaluate the inventory. Organize products by outdate and remove/dispose any expired products.
2. Count and Inspect the inventory listed. During inspection, remove any questionable units.
3. Determine the requested amount of products. If the current inventory is equal to or less than the Restock Inventory Level then request the amount of products to reach the General Inventory Levels. For example: if 30 LPC Counted, and the Restock Level is 40 and general inventory is 50. One would order 20 LPC to bring inventory back to General Inventory range, 50 LPC.
4. Send the form to RHBB for products to be packed and shipped to UHBB or sent via tube.

BLOOD TYPE	Current Counted INVENTORY LPC	Current Counted IRR LPC	Current Counted Pheno LPC	Total Units Counted	Restock Level LPC	General Inventory Level	Volume of LPC To Restock IF less than 0, indicate 0 or leave blank	Special Products and Emergency Units MTP Tray = 6 LPC		
O Pos								Emergency Set UP	Required Products Set Up	If Okay = √ If replaced = R
O Neg								MTP Adult (O+) 2 Trays with 6 LPC	O+ Tray 1 O+ Tray 2	
A Pos								**MTP Adult: (O-) 1 Tray with 6 LPC	O- Tray	
A Neg								Comments		
B Pos										
B Neg										
AB Pos										
AB Neg										

Platelets	Current Counted	Minimum Inventory Level	2	Requested Replacement of Platelets
PRT, CMV and Non-CMV Negative		General Inventory Level	4	

	Current Counted TP	Min. Inv. Level	Volume to Restock	Current Counted FFP	Minimum Inv. Level	General Inventory Level	Requested Replacement	Current Counted Pooled CRYO	Minimum Inv. Level	General Inventory Level	Requested Replacement
O											
B											
A											
AB											

I. PURPOSE

Detail procedure for Daily Inspection and maintenance of all blood component inventories.

II. SCOPE

This SOP addresses the critical control points of inventory management and storage of all available blood products for both acceptability and availability. This includes all products in inventory at Methodist Hospital, University Hospital, and Riley Hospital for Children.

III. EXCEPTIONS

None

IV. DEFINITIONS

None

V. POLICY STATEMENTS

1. The available inventory will be supplied by dedicated blood center vendors.
2. All available blood products will be inspected and counted daily for the purposes of removing questionable/unacceptable units and maintaining acceptable minimum inventory levels.
3. All blood products must undergo additional inspections prior to being dispensed for patient use.
4. Requests are placed with blood suppliers as patient needs require. Document on the IUHPL Blood Bank Daily Inventory Form (See Daily Inventory form Riley Blood Bank - Daily Inventory).
5. Standing Orders exist with our suppliers for the following items:
 - a. Leukoreduced RBC
 - b. Apheresis Platelets
 - c. Plasma
 - d. Cryoprecipitate
6. Notify a supervisor or the Blood Bank physician if there are problems in obtaining blood or blood components.
7. **ONLY** blood bank personnel have authorization to remove contents from Blood Bank Storage equipment.

VI. PRINCIPLE/BACKGROUND

None

VII. MATERIALS

Daily Inspection and Inventory Sheets

VIII. SPECIMEN REQUIREMENTS

None

IX. PROCEDURE

A. Visual Check of Blood Products

1. Visual Check: Inspect appearance of LPC inventory each day using the following guidelines:
 - a. LABELS are INTACT AND UNITS ARE NOT EXPIRED.
 - b. NORMAL APPEARANCE: By completing the Daily Inventory form (Forms Riley Blood Bank - Daily Inventory, Methodist Daily Inventory, and Form: University Daily Inventory) you are documenting a "Normal" appearance of inventory
 - c. ABNORMAL APPEARANCE: Remove unit(s) from inventory and place in physical and electronic Quarantine location until appropriate action and disposition is determined.
 - d. Observe units for:
 1. Purplish or greenish color may indicate bacterial contamination and/or hemolysis.
 2. Leaking tubing, seams, etc.
 3. Questionable appearance: refer to a supervisor or senior technologist.
 4. Lipemic
 5. Discolored or cloudy

B. Storage of Blood Products

1. Maintain orderly and un-crowded arrangement stock:
 - a. Shelves labeled and designated for each ABO/Rh, CMV negative, irradiated and antigen negative (phenotyped), as applicable.
 - b. Arrange short-dated units in front, left row, progressively getting fresher as units go back and to the right.
 - c. RBC products
 - Mark units (less than 4 days) LPC units, whenever possible, to ensure they can be used before outdate.
 - Release Short-dated, (less than seven (7) days remaining); reserved (phenotyped) units to stock, as patient requirements dictate.
 - Rotate stock as additional units are received.
 - Rotate stock as crossmatched inventory is released to stock.
 - d. Disposition of outdated units:
 1. Regular Units (see Cerner application Final Disposition, Final Disposition / Wastage):
 - a. Perform Product History Review
 - b. Determine if credit needed, i.e. transferred from outlying IUH facilities.
 2. Consignment Units (see Cerner application Final Disposition, Final Disposition / Wastage):

Includes:

- a. All AB+ LPC.
 - b. LPC received < 7 days before expiration.
 - c. All units designated consignment from supplier should be documented per the donor center's instructions for receiving credit.
3. Partial Units (see Cerner application Final Disposition, Final Disposition / Wastage).
2. Count number of each category of inventory each day.
 3. Record each count in appropriate spaces of Daily Inventory forms.
 4. Tally the total number of products by type on the Daily Inventory forms.

C. Replenishment of Inventory

1. UHBB
 - a. Determine the requested amount of products.
 - b. If the current inventory is equal to or less than the Restock Inventory Level then request the amount of products to reach the General Inventory Levels.
 1. For example: if 30 LPC Counted, and the Restock Level is 40 and general inventory is 50.
 2. One would order 20 LPC to bring inventory back to General Inventory range, 50 LPC.
 - c. Send the form to RHBB for products to be packed and shipped to UHBB or sent via tube.
2. MHBB and RHBB
 - a. Compare the **Total Units Counted, Minimum Inventory to the volumes to be received on the Standing Order.**
 - b. If the amount to be received is greater than the products needed, then don't order any additional.
 - c. If the amount to be received is less than the number of products needed, then place an order with the blood supplier.

2. Directed and Autologous Inventories:

1. Visual Check: Weekly record on Blood Bank Daily QC Log sheet, (see form BBQC- F008); See section 1.1 for guidelines.
2. Autologous RBCs are discarded from inventory after expiration-never cross-over to general inventory; See (SOP Final Disposition / Wastage for discard procedure).
3. Directed Donor RBCs:
 1. Transfer to general inventory seven (7) days prior to expiration or seven (7) days after surgery. If intended transfusion date is not specified contact attending physician for release.
 2. Transfer to general inventory in (Cerner) Modify Products:
 1. ISBT units: X DD RBC.
 2. Codabar units:Directed → Homologous.
 3. Check in Patient Product Inquiry (PPI) to verify product removed from patient. (Cerner NOTE: AUTO and DD buttons are changed to now *dithered* out).
 3. Discard expired units; see SOP Final Disposition / Wastage.
4. Documenting information pertaining to directed or autologous units:
 1. Go to (Cerner) "Product History Review".

1. Click on Comment icon.
2. Free text any pertinent information.

X. APPENDICES/ATTACHMENTS/FORMS/ LABELS

Attachment 1 Example of IBC Standing order

Riley Blood Bank - Daily Inventory

Methodist Daily Inventory

Form: University Daily Inventory

XI. REFERENCES/CITATIONS

Quality System, AABB/IU Health.

AABB Technical Manual, current edition.

AABB Standards, current edition.

Policy #:

BBT – 076