[](http://depts.washington.edu/labweb/index.htm)

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| **University of Washington,**  **Harborview Medical Center**  **325 9th Ave. Seattle, WA, 98104**  **Transfusion Services Laboratory**  **Policies and Procedures Manual** | **Original Effective Date:**  **January 10, 2012** | **Number:**  **5413-2** |
| **Revision Effective Date:**  **April 1, 2013** | **Pages:**  **4** |
| **TITLE: Using the Antibody Identification Worksheet** | | |

**Purpose**

To provide instructions for the systematic and accurate completion of the Antibody Identification worksheet, and an organized and analytical approach to antibody identification documentation.

**Procedure**

**Note:** Complete and accurate documentation is required. Fill in all the fields on the form.

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| **Step** | **Action** | **Related Document** |
| 1. | **Patient Demographic information**—Sunquest or ORCA label may be used for these:   * Name * Accession * HID * DOB * Sex | Antibody Identification Worksheet |
| 2. | **Important supporting information—**Call the nursing station or PSBC to acquire this information, and check ORCA, it is often very important.   * Diagnosis * Transfusion History * Pregnancy History * Problems or comments regarding the patient’s condition |  |
| 3. | **Sample information**   * Date drawn * Date of testing   **NOTE:** If a second sample is drawn because of QNS, it must be typed and screened before being used in the antibody workup. | Policy for the Provision of Crossmatch Compatible Blood |
| 4. | **Basic Testing Results—NOTE: Record or attach documentation of all work.**   * ABO * Rh * DAT * Prewarm Antibody screen. * Include the antigram of the screening cells used. * Any other pertinent testing such as previous elutions or adsorptions, etc. * Cold panel results, if appropriate * Pre-warm results, if appropriate |  |
| **Step** | **Action** | **Related Document** |
| 5. | **Additional Test Column**   * Check NO or Yes and enter Tech ID as applicable:   + ABO Discrepancy Workup?   + Elution done?   + Last Wash Negative? * Enter Elution Results |  |
| 6. | **Panel Cell Rule Out/Rule In Results—See example attached.**   * Record the total number of rule out cells on the appropriate line:   + Homozygous   + Heterozygous and No zygosity | Guidelines for Antibody Identification  Using RCAID for Antibody Identification |
| 7. | **Patient Phenotype**   * Record the results of any patient antigen typing. * Use a 0 for negative. * Use a + for positive. * Note whether the antigen typing was done by IRL or HMC in the space at the end of the phenotyping row. |  |
| 8. | **Record second tech review.**  ***Prior to issuing red blood cells for transfusion, the antibody identification must be reviewed by a second technologist.*** |  |
| 9. | **Record additional information as applicable:**   * History from other facilities:   + PSBC must be contacted as the transfusion service for King County and parts of Western Washington   + Other facilities: contact facilities that have been identified as providing patient care * Discussions with the Medical Director, Lab Medicine Resident and/or TS Manager:   + Date and time   + Recommendations |  |
| 10. | **Record additional testing required to complete identification.** |  |
| 11. | **If additional sample was requested,** record contact person, date and time |  |
| 12. | **Donor units to be issued:** List antigens that must be negative.  *Note: this list may match the antibody identification or it may differ if additional antigens will be honored due to an incomplete workup or the Medical Director’s decision to issue “antigen matched” red blood cells.* |  |
| 13. | **Circle Y or N (yes or no) for required testing and attributes:**   * AHG XM * Leukoreduction * Irradiation   Record additional requirements (i.e., washed) in the Donor units to be issued area. |  |

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| **Step** | **Action** | **Related Document** |
| 14. | **Immunohematology Reference Laboratory Information**—record in lower left corner in appropriate column.   * **IF** sent out, record the Date and Time it was sent out, and the Tech ID of the person sending it out. * When the Preliminary report is received: * Result in BOP. * Update the Patient History File per Reference Lab Send Out Process * Record the Date, Time, and Tech ID of the update. * When the Final report is received: * Verify whether there has been a change from the preliminary. If so, update BOP, and notify medical director if original product choices need to be changed, correct previously entered results as needed, and put a copy of the final report in the patient’s folder. * If final report does not vary from the preliminary report, record Date and Time received, and Tech ID of person receiving and verifying the report, and put final report in patient’s folder.. | Reference Lab Send Out Process |
| 15. | **ABID Completion Tasks**  **Check Y or N (yes or no) for the following:**   * Rule of 3 satisfied * AB Path added?   + If this is the first time that antibody(s) has been identified at HMC, add test code ABPATH in BOP, and circle YES.   + If this antibody was previously identified at HMC, circle No for AB PATH added. * DAT Added?   + Add tests and results in Sunquest to generate a charge and send results to ORCA/EPIC. * SQ Resulted?   + Update Sunquest, and Circle YES, or if SQ does not require an update, circle NO. * BAD Update?   + Update the patient BAD file, and circle YES, or if it does not require an update, circle NO * Pt. Antigen Typed? * AHG XM complete?   + Note whether AHG crossmatches have been done by circling YES or NO * Antigram Attached? |  |
| 16. | **Results Documentation**   * Record the antibody(s) that was identified. * Attach a printout of RCAID rule outs. * Add any comments or pertinent information that supports the identification. |  |

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| **Step** | **Action** | **Related Document** |
| 17. | **Billing Documentation**   * Add appropriate test codes if more than one panel was required. This bills for the extra panel. * Bill for an additional panel for each group of 8 or more selected cells. * Add appropriate AGI test codes and result. This bills for the antigen typing. * Be sure to add Anti-A1 results if doing ABO discrepancy workup. This charges for the Anti-A1 lectin. * Record number of panels charged on the AB ID Worksheet | Antigen Typing Patient and Donor Red Cells |
| 18. | **Review**  The TS Manager will review, sign, and date the AB ID worksheet. |  |

**References**

Blood Bank User’s Guide, Misys Laboratory, Version 6.0.1