**Purpose:**

This process provides an overview of workflow for resolving discrepant Blood Bank testing results.

|  |  |  |
| --- | --- | --- |
|  | **Action** | **Related Documents**  |
| **1** | * If ABO, RH or Antibody Screen test results exhibit the following external discrepancies:
	+ Current results do not match previous testing on record.
	+ Current results do not correlate between tube and TANGO methods.
	+ Current results do not correlate with patient personally communicated results.
 | * Proceed to step 4 for Historical Record Investigation.
 | Historical Data Resolution Policy |
| **2** | * If ABO forward and reverse type do not agree, as per Appendix A, or show unexplained mixed-field results on ABO antisera tubes:
 | * Refer to ABO Discrepancy Resolution Process
 | * Table A
* ABO Discrepancy Resolution Process
 |
| **3** | * If Rh/D test results have positive reaction strength <2+, unexplained mixed-field reactions, or are negative when historical results were positive.
 | * Follow the procedure for performing a weak D test.
* Utilize other manufactured sources of Anti-D
 | * Weak D test by Tube
* ABD Type by Tube Method
 |
| **4.** | Historical Record Investigation:* Perform clerical check of patient identification.
 | * Compare patient sample, label, paperwork and SQ result entries for the following information:
	+ Full name, last, first, and middle name.
	+ Hospital identification number (HID).
	+ Phlebotomist ID (recorded on both sample and order).
	+ Date and time of sample collection.
 | * Historical Data Resolution Policy
* Sample Acceptance Evaluation
* Sample Rejection Policy
 |
| **5.** | If any of the above patient identification is found discrepant: * Request patient sample redraw.
* Pull all available patient samples.
* Do not result interpretation of current testing which was found discrepant.
* Reassign the blood bank computer orders to the correct patient HID account.
* Credit any orders that may have been completed on the wrong patient HID, as necessary.
* Proceed to step 7 for testing on redraw sample.
 | If none of the above patient identification is found discrepant,:  | * Order Entry in SQ
 |
| Proceed to step 7 with the existing patient sample. |
| **6.** | If only ABO/ Rh testing was ordered, repeat all immediate spin testing on necessary sample from step 6. | If other testing was ordered on the specimen (Antibody Screen, DAT, Crossmatch), complete full testing phases on necessary sample from step 6. | * ABOD by tube method
* Antibody screen by LISS tube IAT
* Crossmatch by LISS Tube IAT Method
 |
| **7.** | Record second ABO/D results on Discrepancy worksheet. | And/or record second results for other testing on Discrepancy worksheet. |  |
| **8.** | Evaluate Discrepancy: | * Selection of Red Blood Cell Units
* Selection of Platelets, Plasma, and Cryo
* Emergency Release Allocation Process
 |
| **If** | **Then discrepancy is** | **Take action** |
| * + Second set of test results matches original record, alternative test method or patient verbal account of testing,
 | * Resolved.
 | * Interpret ABO/Rh, antibody screen, and/or other test results.
* record on worksheet and in computer.
* Re-assign blood products as requested for patient transfusion.
 |
| * + Second set of testing results does not match original record, alternative test method or patient verbal account of testing,
 | * Not resolved.
 | * In the event of urgent blood transfusion requests, issue universal donor type components and/or uncrossmatched components, as applicable.
* Notify TS Manager and TS Medical Director.
 |

**Table A: Expected Tube Reactions for ABO Type Testing**

|  |  |  |
| --- | --- | --- |
| **If the forward grouping reaction of patient cells with** | **And the reverse grouping reaction of patient serum or plasma tested with** | **Interpretation of ABO type** |
| **Anti-A is** | **Anti-B is** | **A1 cells is** | **B cells is** |
| 0 | 0 | ≥2H | ≥2H | O |
| 0 | 0 | ≥2H | ≥2H | O |
| ≥3 | 0 | 0 | ≥2H | A |
| ≥3 | 0 | 0 | ≥2H | A |
| 0 | ≥3 | ≥ 2H | 0 | B |
| 0 | ≥3 | ≥2H | 0 | B |
| ≥3 | ≥3 | 0 | 0 | AB |
| ≥3 | ≥3 | 0 | 0 | AB |

**References:**

AABB Standards for Blood Banks and Transfusion Services, Current Edition.