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

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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:**  **March 10, 2014** | **Number:**  **C-5001-1** |
| **Revision Effective Date:** | **Pages: 4** |
| **TITLE: Autologous Bone Process** | | |

**Purpose**

To describe the Harborview Medical Center Transfusion Service process for tracking, storage, and release of Autologous Bone for re-implantation.

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| **Responsible**  **Entity** | **Action** | **Related Documents** |
| **Submitting Autologous Bone for storage** | | |
| * OR designee | * Complete Tissue Tracking Record to accompany autologous bone. * Deliver the autologous bone to TSL. * Participate with TSL Staff in the 2 person “read-back” of patient identifiers on the Tissue Tracking Record and the bone package. * Initial Autologous Bone Tracking Log in “Delivered by” column | * HMC1999: Tissue Tracking Record * Receipt of Autologous Bone for Re-Implantation * Autologous Bone Tracking Log |
| **Receiving Autologous Bone for storage** | | |
| * TSL Staff | * Timestamp the Tissue Tracking Record * Sign “Name of Person Accepting Tissue” column * With OR designee, perform 2 person “read-back” of patient identifiers on the Tissue Tracking Record and the bone package. * Visually inspect bone package for acceptance. * Complete QIM and PSN if the bone package does not pass visual inspection. * Review Tissue Tracking Record for completeness.   + Tissue culture information must be completed * Complete Autologous Bone Tracking Log * Update database | * Receipt of Autologous Bone for Re-Implantation * Quality Improvement Monitoring form (QIM) * Patient Safety Net (PSN) |
| **Placing Autologous Bone into storage** | | |
| * TSL Staff | * Attach unique tracking number to Tissue Tracking Record and Autologous Bone Tracking Log. * Prepare Cryo-label and attach to bone package. * Prepare Quarantine label and attach to bone package * Place labeled bone package in Quarantine section of the ultralow freezer. * File Tissue Tracking Record in the Quarantine section of the Tissue Tracking Binder. | * Autologous Bone Tracking Log Form * Tissue Tracking binder * Receipt of Autologous Bone for Re-Implantation |

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| **Responsible**  **Entity** | **Action** | **Related Documents** |
| **Storing and Monitoring Autologous Bone** | | |
| * TSL Staff | * Maintain storage devices according to regulatory requirements. * Review culture results for autologous bone. * Check microbiology results until finalized. * Document final results in Tissue Database and Autologous Bone Tracking Log. * **Negative Cultures:**   + Move from quarantine to inventory storage section of ultralow freezer.   + File Tissue Tracking Record in Inventory section of the Tissue Tracking Binders, alphabetically. * **Positive cultures**:   + Notify TSL Medical Director and patient’s physician.   + Fill out a Notification for Release of a Non-Conforming Autologous Bone form for routing to the Attending Physician and TS Medical Director.   + File completed Nonconforming form with Tissue Tracking Record if bone will be re-implanted.   + Discard nonconforming bone as indicated. * Review daily surgery schedule for potential re-implantations. * Verify acceptability of bone for impending re-implantations * Monitor bone expiration date for discard. * Update database. | * Notification for Release of a Non-Conforming Autologous Bone form * Receipt of Autologous Bone for Re-Implantation * Maintaining and Issuing Autologous Bone for Re-implantation * Storage and Release of Non-Conforming Autologous Bone * Notification Letter |

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| **Request for and Release of Bone for Re-implantation in Harborview** | | |
| * OR designee | * Provides notification of intent to re-implant tissue * Arrives in TSL with Bone Release form or tubes form to TSL * Participates in 2 person “read-back” of patient Identifiers on Bone Release form and bone package label in TSL or O.R. | * Maintaining and Issuing Autologous Bone for Re-implantation * Bone Release form |

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| **Responsible**  **Entity** | **Action** | **Related Documents** |
| **Request for and Release of Bone for Re-implantation in Harborview** (continued) | | |
| * TSL Staff | * Locate the Tissue Tracking Record * Locate the entry in the Autologous Bone Tracking Log * Remove the corresponding bone package from the freezer. * Perform visual inspection of the bone package. * Verify patient identifier match. * Verify that Cryo number label on the bone package matches the number label on the Tracking Record and Log. * Perform a 2 person verification of patient identifiers with OR designee or TSL tech of the following: * Bone Release form * Cryo label * Autologous Bone Tracking Log * Tissue Tracking Record * Complete TSL portion of Bone Release form * Release bone package to OR designee in TSL or OR. * Record the following on the Autologous Bone Tracking Log and Tissue Tracking Record: * Date/time of removal * Issuing TSL tech ID * OR designee initials as receiver (Issued to) * Place Tissue Tracking Record in Issued section of the binder. | * Maintaining and Issuing Autologous Bone for Re-implantation |

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| **Request for and Release of Bone for Re-implantation to an Outside Facility** | | |
| * Requesting Facility | * Provides notification of intent to re-implant tissue * Arrives in TSL with Autologous Bone Release for Transfer to Outside Facility form * Participates in 2 person “read-back” of patient Identifiers on Autologous Bone Release for Transfer to Outside Facility form and Tissue Tracking Record in TSL. | * Maintaining and Issuing Autologous Bone for Re-implantation * Autologous Bone Release for Transfer to Outside Facility form |

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| **Responsible**  **Entity** | **Action** | **Related Documents** |
| **Request for and Release of Bone for Re-implantation to an Outside Facility** (continued) | | |
| * TSL Staff | * Locate the Tissue Tracking Record * Locate the entry in the Autologous Bone Tracking Log * Remove the corresponding bone package from the freezer. * Perform visual inspection of the bone package. * Verify patient identifier match. * Verify that Cryo number label on the bone package matches the number label on the Tracking Record and Log. * Perform a 2 person verification of patient identifiers with OR designee or TSL tech of the following: * Bone Release form * Cryo label * Autologous Bone Tracking Log * Tissue Tracking Record * Complete TSL portion of Bone Release form * Release bone package to OR designee in TSL or OR. * Record the following on the Autologous Bone Tracking Log and Tissue Tracking Record: * Date/time of removal * Issuing TSL tech ID * OR designee initials as receiver (Issued to) * Place Tissue Tracking Record in Issued section of the binder. | * Release of Autologous Bone for Transport to Outside Facility * Autologous Bone Release for Transfer to Outside Facility * Checklist for Release of Autologous Bone to Transfer to an Outside Facility |

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| **Discarding Tissue** | | |
| * TSL Staff * TSL Mgr * TSL Medical Director | * Complete Notification for Discard form * Forward to Attending Physician for signature * Forward to TSL Manager/Medical Director for signature. * Discard per SOP * Move Tissue Tracking Record to the Tissue Discard binder. * Update database with new status | * Discarding Autologous Bone * Notification for Discard form * Notification Letter |

**References:**

Standards for Tissue Banking, Current edition, American Association for Tissue Banks. AATB, Bethesda, MD.