

Sample Collection and Requirements

Blood Bank Testing

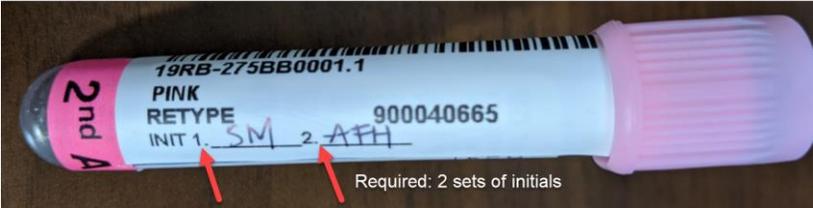
Blood Bank Testing

Sample Collection and Requirements

Positively identifying your patient and properly labeling the Blood Bank sample at the bedside is the first and most important step to assure a safe transfusion.



Prove that you verified the draw!
Two sets of legible initials must be on the tube or tube will need to be redrawn.



Bank Testing: Sample Collection and Requirements

The person who draws the sample and another healthcare provider must verify the identity of the patient at the bedside and initial the label

- **Verify patient's name at the bedside**

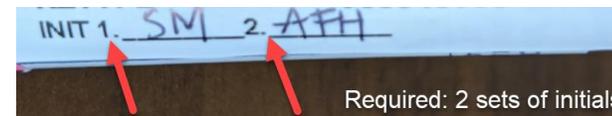
- Compare hospital ID bracelet to the specimen (lab) label.
- While viewing ID bracelet, ask pt. to state his/her name and DOB & verify match.

- **Info required on lab label:**

- Patient's first and last name
- medical record number
- draw date
- All of these are included on the Epic zebra label (*the date is the Julian date in the accession number*)

- **Specimen collection**

- Draw sample in a pink top tube
- 1 mL of plasma is required for blood bank testing
 - Short draws & grossly hemolyzed specimens are likely to be rejected. Invert tube 10 times to mix to avoid hemolysis.
- Label the sample with the lab label **while still in the presence of the patient**,
- **IMMEDIATELY** initial the specimen clearly
 1. Your initials **PLUS**
 2. the initials of the second-check in the room drawing with you.



Blood Bank Testing: Sample Collection and Requirements

Why does the blood bank have such strict labeling requirements?
99% accuracy is not good enough, 1% is a SENTINEL EVENT



UCHealth transfused ~37,000 blood products last year. With 99% accuracy, 370 blood products (almost one per day) could have been a sentinel event.

Blood Bank Testing: Sample Collection and Requirements

If the patient is receiving ABO/Rh testing for the first time at a UCHealth facility, a retype sample is required.

- A *retype* is ABO/Rh testing repeated on a separate specimen to ensure the accuracy of results
 - This sample must be from a **new draw** – DO NOT transfer blood from a previous draw.
 - The blood bank controls this process by sending you the **short pink tube**
 - Samples not drawn in the smaller pink top sent by blood bank will be rejected
 - Pt. Care Units are not allowed to order and stock the short pink tubes. Lab has the only supply.
- The patient must have two blood type specimens on record to receive products
 - If a patient has two blood types done by our system, then products other than RBCs can be set up without current testing
 - AABB Standard 5.14.5 requires a second sample for confirmation of the ABO and Rh types prior to issuing blood to a patient being transfused for the first time in their facility.



Blood Bank Testing: Sample Collection and Requirements

Why is a second sample required at UCHealth facilities for a retype? Risk of WBIT!

- WBIT (Wrong Blood In Tube) is when the tube says it is patient A's blood, but it actually contains blood from patient B.
 - A study (AJCP 2006;126(3):422-426) stated this risk to be approximately 1 in 2000 specimens.
- WBIT is a problem because the safe testing protocols available will not protect a patient when the wrong blood is in a tube with their name on it.
 - Blood banks always check previous records to make sure that the current ABO and Rh testing agrees with what was seen previously, so WBIT is usually discovered prior to transfusion in patients with previous records.
 - There is high risk when WBIT occurs on patients who are being transfused for the first time (with no previous records to check).

Retypes protect patients! *Thank you for taking the extra step for patient safety.*



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