UNIVERSITY of MARYLAND ST. JOSEPH MEDICAL CENTER	**LIS-29 Blood Bank Service Manual**	**Policy Executive: Laboratory Medical Director**
Patient Care Policy	**Patient Safety**	**Policy Owner: LIS Coordinator**

PATIENT IDENTIFICATION FOR CLINICAL CARE AND TREATMENT

INSTRUCTIONS **In all cases, patient identification and specimen labeling is to be done at the side of the patient. Patient identification is to be done using the hospital's computer application for specimen labeling. Down-time applications require the down-time requisition with 2 persons who have been trained in the hospital patient identification practice. Label requirements are outlined below.**

1. A specimen label is prepared prior to collection. A computer label, addressograph label or hand printed label may be used. Use of hand-held phlebotomy devices is preferred. The information must be legible, correct (includes spelling) and complete (see #2). Any information truncated must be added by hand. Any discrepancies from this will result in a re-draw being requested by the blood bank.

2. The patient's wristband, specimen label and requisition are compared aloud for:
- Patient First and Last Name (if a middle name or initial is used, they must agree.)
- Date of birth.
- Patient Medical Record Number (MRN)

3. Identification of the person drawing the sample is captured electronically when using Cerner Bridge, and printed on the resulting specimen label. If drawn using downtime procedure, identification of person drawing the blood sample **(Collector #1),** and identification of person witnessing this draw **(Collector #2),** must appear on the downtime request form. Additionally, the person drawing the sample must sign the specimen label, and this information must agree with that on the downtime request form. Discrepancies from this practice may result in a re-draw being requested by the blood bank.

4. The blood sample is sent immediately to the blood bank.

5. A qualified blood bank technologist will confirm all identifying information (Patient Name, Medical Record Number, Date of Birth) is present on the label, and matches that in the patient's electronic record. Any sample

received by the blood bank found to have a discrepancy or incomplete, incorrect (includes spelling), illegible, or missing information is to be discarded and a new sample requested. Specimen labels and downtime requisition slips missing phlebotomist initials may be added by phlebotomist in the following situations:

a. The actual phlebotomist and second person verifying patient information signatures are on the downtime requisition slip
b. The actual phlebotomist signature is on the specimen label and the second person verifying patient information signature is on the downtime requisition slip
c. Phlebotomist name is cut off during printing of Cerner Bridge label, with verification of phlebotomist name in Cerner (Pathnet)

6. If collector identification is missing the sample is to be discarded and a new sample drawn.

7. Once received in the Blood Bank, a specimen label may not be altered, removed or replaced in any way. If incorrect, the sample will be discarded. A specimen label or original identification cannot be covered or over-labeled in any way. If there is evidence of over-labeling, the sample will be discarded and a new draw requested by the blood bank.

AUTOLOGOUS DONATION - RED CELLS

SPECIMEN TYPE N/A

CONTAINER N/A

INSTRUCTIONS Must have physician's written orders.

LABORATORY Blood Bank

METHOD

AVAILABILITY Autologous products are drawn by the American Red Cross, and shipped to UM-SJMC. Scheduled through the American Red Cross Special Collections Services 888-808-4918.

SPECIAL INSTRUCTIONS See above.

INTERFERENCES

COMMENTS

BLOOD TYPING (GROUP & RH) and ANTIBODY SCREEN

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS Routine; will be done in order of receipt in Blood Bank. (usually done within 4 hours)

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours, may be ordered STAT (approximately 1.5 hour TAT upon receipt in BB)

SPECIAL INSTRUCTIONS

INTERFERENCES

1. Serum Separator Tube (SST) not acceptable.
2. Tube labeling errors. (See Labeling Procedure)
3. Hemolysis
4. IV Fluid

COMMENTS

CORD BLOOD / INFANT REQUEST (TYPING AND DIRECT COOMBS)

SPECIMEN TYPE Cord blood or whole blood (anticoagulated).

CONTAINER Cord blood - 2 pink (Cord)
Heel stick - 1 lavender (Infant)

INSTRUCTIONS Routine; will be done in order of receipt in Blood Bank.

LABORATORY Blood Bank

METHOD

AVAILABILITY 24 hours (may be ordered STAT)

SPECIAL INSTRUCTIONS

INTERFERENCES

1. Serum separator tube (SST) not acceptable.
2. Tube labeling errors (see Labeling Procedure).

COMMENTS

COMPATABILITY TESTING - RED BLOOD CELLS

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS Routine orders will be handled in order of receipt in Blood Bank. When date and time needed is specified, every effort will be made to complete the crossmatch by that time.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours a day, may be ordered STAT

SPECIAL INSTRUCTIONS Same specimen may be used in combination with order for type and screen.

INTERFERENCES

1. Serum separator tube (SST) not acceptable.
2. Rare blood types or antibodies may extend preparation time.
3. Tube labeling errors (See Labeling Procedure)
4. Hemolysis

COMMENTS Irradiated and other restrictions on transfusion of red blood cells are available upon request (May extend preparation time).

CRYOPRECIPITATE, CRYOPRECIPITATE 5, POOLED

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS Contact blood bank. Units must be thawed, and they expire 6 hours from time of thawing. CRY5 (pooled product) expires 4 hours from time of thawing. Unit must be started or returned to the Blood Bank within 2 hours of release to the floor. Thawed units are stored at room temperature.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours, may be ordered STAT

SPECIAL INSTRUCTIONS

1. Transfuse using a routine component filter.
2. Same specimen may be used in combination with order for type, antibody screen and/or request for other components.

INTERFERENCES

1. Serum Separator Tube (SST) not acceptable.
2. Units may have to be obtained from the ARC.
3. Tube labeling errors (See Labeling Procedure).

COMMENTS

DIRECT COOMBS TEST

SPECIMEN TYPE Whole Blood (anticoagulated)

CONTAINER Lavender (10 cc) or Pink (plastic)

INSTRUCTIONS Routine; will be done in order of receipt in Blood Bank.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours, may be ordered STAT

SPECIAL INSTRUCTIONS

1. Same sample may be used in combination with order for type or antibody screen
2. Cord blood obtained in a sterile pink top tube at delivery.

INTERFERENCES

1. Tube labeling errors (See Labeling Procedure).
2. Serum separator tubes (SST) are not acceptable.

COMMENTS

DIRECTED DONATION - RED BLOOD CELLS

SPECIMEN TYPE N/A

CONTAINER N/A

INSTRUCTIONS Directed donor products are drawn by the American Red Cross and shipped to UM-SJMC.

LABORATORY Must be scheduled at the American Red Cross (ARC).

METHOD

AVAILABILITY Contact Blood Bank (ext 1713) for information regarding this procedure.

SPECIAL INSTRUCTIONS

INTERFERENCES

COMMENTS

FRESH FROZEN PLASMA, THAWED PLASMA

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS Contact blood bank. Units must be thawed, and they expire 5 days from time of thawing. Units must be started or returned within two hours of release to the floor.

(Exception: Issued in transport cooler)

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours, may be ordered STAT

SPECIAL INSTRUCTIONS Transfuse with a routine component filter.

INTERFERENCES

1. Serum Separator Tube (SST) not acceptable.
2. Thawing may take up to 40 minutes.
3. Tube labeling errors (See Labeling Procedure).

COMMENTS

IRRADIATED BLOOD OR COMPONENTS

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS Contact Blood Bank.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY Blood Bank will contact the ARC for availability.

SPECIAL INSTRUCTIONS Transfuse with routine component filter.

INTERFERENCES

1. Serum separator tubes (SST) are not acceptable.
2. Tube labeling errors.

COMMENTS Procurement of these products is from American Red Cross. Delays may occur.

PEDIATRIC ALIQUOT - RED CELLS (INFANTS < 4 months old)

SPECIMEN TYPE Cord blood, whole blood (anticoagulated)

CONTAINER Cord blood - 2 pink tops, Heel stick - 1 lavender (pediatric), Maternal - 1 Lavender, Pink (plastic)

INSTRUCTIONS Contact Blood Bank. Aliquot must be prepared prior to use and may have an expiration date of 24 hours from the time of preparation. The aliquot must be transfused or returned to the Blood Bank within 30 minutes of release to the floor.

LABORATORY Blood Bank

METHOD

AVAILABILITY 24 hours, may be ordered STAT

SPECIAL INSTRUCTIONS

INTERFERENCES

1. Serum separator tubes (SST) not acceptable.
2. Tube labeling errors (see Labeling Procedure).
3. Units may have to be obtained from ARC.

COMMENTS Pediatric red cells are fresh CPDA-1, Hgb S negative, CMV seronegative, and Irradiated

PHLEBOTOMY (THERAPEUTIC)

SPECIMEN TYPE Whole Blood

CONTAINER N/A

INSTRUCTIONS Must have physician's written orders.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY Schedule with Phlebotomy service.

SPECIAL INSTRUCTIONS Floor Nurse may be required to stay in attendance.

INTERFERENCES

COMMENTS

PLATELETS PHERESIS

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS Units must be started or returned within 30 minutes of release to the floor Platelets are stored at room temperature, with agitation.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY Contact Blood Bank. Special orders may need consultation with the pathologist.

SPECIAL INSTRUCTIONS 1.Transfuse using a routine component filter.

2. Same specimen may be used in combination with orders for type, indirect coombs, and/or request for other components.

INTERFERENCES 1.Serum separator tube (SST) not acceptable.

2. Tube labeling errors (See Labeling Procedure).

COMMENTS All pheresis platelets are supplied as leukoreduced. One pheresis platelet product is equivalent to one adult "dose" of platelet product. Special request for matched pheresis platelet products must be pre-approved by the Blood Bank Medical Director, and ordered under the supervisor of the Blood Bank. These products may take extended time period to procure from blood collection agencies.

RED CELLS, WASHED

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS Washing is performed just prior to transfusion, and may take up to 4 hours. A washed unit expires in 24 hours. Unit must be started or returned within 30 minutes of release to the floor (exception: locations with monitored blood refrigerators).

LABORATORY No longer washed at UMSJMC. Washing performed @ UMMC Blood Bank

METHOD N/A

AVAILABILITY 24 hours.

SPECIAL INSTRUCTIONS

INTERFERENCES N/A

COMMENTS Washed red blood cells require initial pre-approval through the Blood Bank supervisor.

RH (D) IMMUNE GLOBULIN (RHIG)

SPECIMEN TYPE Whole Blood (anticoagulated)

CONTAINER Lavender top or Pink top (plastic)

INSTRUCTIONS May be ordered prenatal at 28 weeks.
Must be ordered within 72 hours on Rh negative mothers involved with Rh positive fetus, abortion, or amniocentesis. A post delivery or post miscarriage/abortion/amniocentesis specimen must be used to ensure proper dosage of RhIg is prepared.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours.

SPECIAL INSTRUCTIONS Same specimen may be used in combination with type, antibody screen, or Rosette test.

INTERFERENCES
1. Tube labeling errors (see Labeling Procedure).
2. Serum separator tubes (SST) are not acceptable.

COMMENTS

ROSETTE TEST

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS Test is ordered by the Blood Bank only and is used in conjunction with orders for Rh(D) Immune Globulin (RhIg) on Rh negative mothers involved with Rh positive infants, abortion, or amniocentesis. A post delivery or post miscarriage/abortion/amniocentesis specimen must be used to ensure proper dosage of RhIg is prepared.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours, may NOT be ordered STAT

SPECIAL INSTRUCTIONS Same specimen may be used in combination with type, antibody screen, or request for RhIg.

INTERFERENCES
1. Tube labeling errors (see Labeling Procedure).
2. Serum separator tubes (SST) are not acceptable.

COMMENTS

TRANSFUSION REACTION WORK-UP

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink top (plastic)

INSTRUCTIONS Discontinue transfusion at once. Call attending physician; notify Blood Bank immediately. Submit first available urine specimen to Stat Lab for complete urinalysis, include comment that urine is for transfusion reaction workup.
Physically return remaining blood unit with tubing still attached to the Blood Bank. Record date, time, and type of reaction in patient's electronic medical record. Submit a post reaction sample.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours, STAT

SPECIAL INSTRUCTIONS

INTERFERENCES 1. Serum Separator Tube (SST) not acceptable.

2. Tube labeling errors (see Labeling Procedure).

COMMENTS

TYPE & SCREEN (ON HOLD) No Blood Crossmatched

SPECIMEN TYPE Whole Blood

CONTAINER Lavender or Pink (plastic)

INSTRUCTIONS An ABO Group, Rh Type and Antibody Screen will be done. No blood will be crossmatched at this time. Orders will be held awaiting further instructions for 4 days (day of draw = day 0). After completion of the Type and Screen, if a crossmatch is requested, the blood can be released following initial testing (electronic) within approximately 15 minutes. If patient has irregular antibodies there may be a delay in providing red blood cells.

LABORATORY Blood Bank

METHOD N/A

AVAILABILITY 24 hours

SPECIAL INSTRUCTIONS 1. Type & screen approved by Medical Executive Committee.

2. If the patient is found to have antibodies, appropriate blood will be obtained and crossmatched prior to receiving further orders from the nursing unit. This will delay the turn around time.
3. Hemolysis

INTERFERENCES 1. Serum Separator Tube (SST) not acceptable.

2. Tube labeling errors. (See Labeling Procedure)

3. Rare blood types or antibodies may affect preparation time.

COMMENTS