 <p>central peninsula hospital 250 Hospital Place Soldotna, AK 99669</p>	POLICY TITLE: Collecting and receiving Blood Bank Specimens	DEPARTMENT: CPGH – Facility Wide CATEGORY: Laboratory Services SECTION: Blood Bank
	POLICY NUMBER: CPGH.701.030	EFFECTIVE DATE: February 2024 Original Date of Policy: BB-558 - Unknown
	AUTHORIZED BY: Laboratory, Medical Director	Revised: CPGH.701.030 – 8/15, 11/17, 07/18, 2/19, 4/20, 10/20, 1/21, 5/21, 7/21, 12/21, 1/22, 2/22 ¹ , 2/22 ² , 5/22, 6/22, 5/23, 8/23, 2/24 Reviewed: 6/91, 7/92, 9/93, 10/94, 1/96, 4/97, 9/99, 9/00, 9/01, 9/02, 5/05, 1/08, 1/09, 1/10, 2/11, 2/12, 2/13, 2/14, 11/16

- APPLIES TO:** Guidelines for obtaining and receiving Blood Bank specimens.
- RESPONSIBILITY:** Laboratory and Nursing staff with knowledge of Blood Bank specimen collection, and laboratory personnel receiving specimens.
- POLICY:** All patients must be positively identified, and all specimens collected for Blood Bank Testing will be performed as outlined in the procedure below.

This procedure **MUST** be followed when collecting specimens for the following tests:

- Type and Screen
- Crossmatch
- ABO and Rh with the possibility of other testing
- Extra blood bank tube
- Postpartum Rhogam or OB event
- Outpatient Antenatal Rhogam Immune Globulin (DO NOT BAND)

PRINCIPLE: **Proper identification and specimen labelling is critical to safe blood transfusions as most hemolytic transfusion reactions result from errors in sample or patient identification.**

- MATERIALS:**
- One 6 ml EDTA (purple) tube
 - Blood Collection Equipment
 - Red Typenex barcoded plain armband
 - Handwritten Typenex armband (for downtime use only)

SAFETY PRECAUTIONS: Refer to the General Lab Procedure LAB.300.010 (GL-113) Infection Control in the Clinical Laboratory.

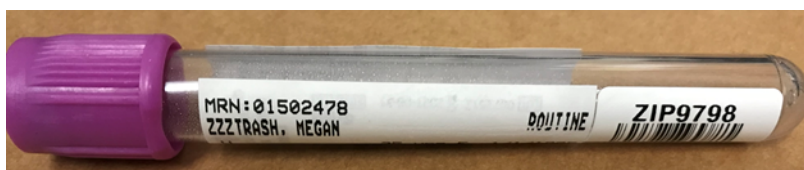
PROCEDURE: **A. USING AN EPIC LABEL FOR A BLOOD BANK SPECIMEN**

Collection personnel:

- A blood bank banded specimen for possible transfusion can only be drawn by RN's, phlebotomists, physicians, and lab techs that are employed at CPH. They must be at the hospital. Clinic and EMS draws for blood bank banded specimens will not be accepted. The 2nd verifier can be any CPH staff member who has been trained in proper patient identification.
- Two qualified persons must do the following together at the patient's bedside or drawing station. Both parties are equally responsible for the accuracy of the information on the sample, and both will be held accountable for any errors.

For Patients who may Receive Blood Products:

1. Collect/Accession orders in EPIC for Blood Bank testing (Type & Screen, Rhogam workup, extra BB Tube, etc...) and go draw patient.
 - **Never** collect/accession Blood or Rhogam products in EPIC.
 - Blood Bank tubes **must** be labeled with an Epic instrument-ready blood bank test label (Type and Screen, DAT, ABORH, Extra BB Tube, etc.)
 - ED/OB/ONC: can order an LAB286 EBBT (extra blood bank tube), which will give you an instrument-ready specimen label from EPIC to print. Orders for Blood Bank testing can be added on later. (See **B** for downtime or trauma situations).
2. Introduce yourself and state where you work.
3. Ensure all labels belong to your current patient and review each label for any special collection instructions.
4. Identify patient according to hospital procedures:
 - An armband must be present on Emergency Department and inpatients. Ensure this before beginning the draw!
 - The patient **MUST** state their full name and DOB, spelling their name if necessary. If the patient is unable to state their name and DOB, the collector will have a family member in the room, or the patient's RN, CNA, or doctor verify the patient's identity.
 - The collector **MUST** compare the patient's name and DOB, as stated by the patient, to the instrument-ready specimen label.
 - The 2nd verifier **MUST** compare the patient's name and DOB, as stated by the patient, to the hospital identification band located on the patient's wrist or ankle.
5. Explain the procedure that you will be performing.
 - ❖ If you leave the patient's location prior to the draw, you must re-verify the patient's identity.
6. Perform venipuncture/specimen collection. See LAB.700.090 for the full Phlebotomy Collections procedure. A 6ml lavender top tube is required for Type and Screen, ABORH Typing, Antibody Screens, and Rhogam Workups.
7. The time must be written on the instrument-ready specimen label **and** both the collector and the 2nd verifier must initial the specimen label. The 2nd verifier must place a checkmark (✓) next to their initials to differentiate between the collector and the person performing the second patient identification.
8. The instrument-ready specimen label must be placed on the tube in the presence of the patient.
9. Complete Typenex band and place on patient:
 - Lift clear plastic film and write the date on the red Typenex barcoded band (for tracking expiration of the Type and Screen).
 - Peel off the backing from the plastic seal and press firmly to cover the date and barcode. This will make it water proof.
 - Peel off one of the horizontal labels from band and place on 6ml lavender tube at the end of the instrument-ready label as shown below so as not to obscure any information on the EPIC label:



- Cut off the tail with **all** the barcoded stickers connected to the band. These will be put into a biohazard bag with the specimen before sending to lab.
 - Secure the band on the patient's wrist or ankle. Wrap band once around patient's wrist or ankle, barcode side out. Be sure to leave at least 2 fingers space between arm and band so it is not too tight.
 - Snap the band clip in place. The band becomes tamper proof when the clip is closed. Then, cut off the excess tail of band.
10. Perform the Final Check! Compare every labelled tube drawn to patient's wrist band, saying the last 3 digits of medical record number out loud for every tube.
11. Place the specimen and the all barcoded labels that were cut off into the biohazard bag.
12. Send specimen to Clinical Laboratory.

REJECT CRITERIA FOR BLOOD BANK BANDED SPECIMENS:

Blood bank specimens are not like other specimens. The AABB Standard states that "the transfusion service shall accept only those samples that are completely, accurately, and legibly labeled."

- ❖ The incorrect EPIC label is unacceptable: e.g. CBCD, CMP
- ❖ A patient chart label is not acceptable for a blood bank specimen.
- ❖ Failure to have two initials on the EPIC label will require a recollect.
- ❖ TWO labels on a blood bank banded specimen is unacceptable.
- ❖ The barcoded blood bank sticker and band cannot be added after the specimen has been sent down to the lab.
- ❖ Grossly hemolyzed specimens will be rejected.

NOTE: If the time of collection is incorrect, the collector can come down to the lab and change it in the presence of the lab tech.

REJECTING BLOOD BANK SPECIMENS:

Call the floor and tell them why you are rejecting the specimen and that you will be putting in for a redraw. Document who you spoke with

:

- a) In EPIC: You have to receive the specimen to use the redraw ability. Put in for the redraw/recollect. Do not cancel and order a new type and screen.
- b) In Wellsky:
 - i. Go to the Order/Specimen window and enlarge it using the 4 dots
 - ii. Search for the patient's MRN
 - iii. Click in the dial button under Orders, highlight the blood bank order that you need to cancel e.g. T&S
 - iv. Click Cancel Order at the bottom of the screen
 - v. Click in the dial button under Specimen, highlight the specimen you need to discard and click Edit at the bottom of the screen
 - vi. Change the Status to D for discard
 - vii. Click OK
 - viii. Click Save

SPECIMEN RECEIVING:

- ix. Close out the window and await new collection for testing.

Notes:

- **Labor and Delivery** inpatients requiring a Postpartum Rhogam Workup, and who already have a barcoded blood bank band, a 3ml Lavender tube is drawn after delivery for testing and a barcode sticker placed next to the EPIC label. If there are no barcode stickers left on the patient's wrist band, write the letters/numbers from the barcoded blood bank band on the instrument-ready EPIC label.

Outpatients:

Obstetrics panel (antennatal or prenatal testing), prenatal Rhogam*, pre-admits, etc

- Draw specimens according to the Phlebotomy Collections policy, CPGH.700.085.
 - 3 ml lavender tubes are acceptable for an obstetric panel (ABORH and antibody screen). This is often a CBC share tube and the type and screen can be added on. Chart labels are acceptable for the obstetric panel as well

*For prenatal Rhogam collections, a 3 ml or 6ml lavender tube is drawn for a TYPE AND SCREEN only. The patient is instructed to make an appointment with Oncology within 72 hours for the Rhogam injection. Oncology will order the Rhogam product.

Laboratory personnel receiving specimens:

1. **Never** collect/accession Blood or Rhogam products in EPIC.
2. Blood bank specimens must be received in the laboratory module of EPIC before being received in HCLL.
3. Make sure the Blood Bank specimen is labelled with all the correct information. Specimens, that may lead to the patients receiving blood products, must include the following:
 - a. Time of Collection (the date is in the accession number)
 - b. Qualified Collector's Initials
 - c. Qualified 2nd patient identity verifier's initials
 - d. Correct Blood Bank Epic label
 - e. Barcoded sticker from Typenex Band (must be on the tube).
4. If any of the required information is incorrect or omitted with the exception of the time which may be corrected by the person who drew the specimen, the specimen must be rejected. Record information in Riskman which will be reviewed by the Laboratory Director.
5. Scan the blood bank test label in EPIC to receive specimen. Ensure that **all** collection information is correct in EPIC; the person who drew the specimen will be the Collector and the 2nd verifier's name must be typed in the Lab Comments.
6. Take all labels, specimen, and wristband stickers to Blood Bank and place in the blood bank centrifuge to spin for 10 minutes.

Blood bank personnel receiving specimens:

1. Repeat steps 3-4 as above.
2. Perform a **history check in Wellsky:**
 - a. From the HCLL home screen under the patient registry, click search.
 - b. Type in the MRN or the Patient's first and last name and click OK.
 - c. Here it will show ABORH, ABSC, AB (antibodies), PI (patient instructions), AG (Antigen typing), TX'd (Transfused), C (Comments).

PROCEDURE:

- d. If any of the above say POS or Y (yes) make sure to investigate.
- e. Click on the patient and choose the corresponding button underneath to investigate further.
3. Perform a history check in **EPIC**:
 - a. Chart Review – Orders – Blood Admin. Check for any antibody identification tests, notes etc from PAMC
 - b. Chart Review – Labs – Blood Admin. Check for any antibody identification tests, notes etc from PAMC.
 - c. Results Review – Blood Bank. Check for any external Labor and delivery results.
 - d. Care Everywhere:
 - i. Select the Care Everywhere Icon next to the patient's photo or initials
 - ii. Click on Labs
 - iii. Change the date to "All Lab Results"
 - iv. Check for any blood bank testing especially for positive antibody screen or antibody indentifications.
4. If needed, see binder for Patient's with Special Transfusion Requirements.
5. Check for a back up index card

NOTE: If there is no history in **HCLL**, a 2nd ABO Rh confirmation **must** be performed regardless of any other history from another source. (See LAB.701.125 ABORh Confirmation on Patients with no History.)

SPECIMEN RECEIVING:

6. Specimens must be received in HCLL.
 - a. From the home screen, enlarge the order/specimen pane (top right).
 - b. Click SEARCH MRN button at bottom. Enter patient's MRN and click SEARCH.
 - c. Previous orders and specimens will populate the windows.
 - d. Verify that it is your patient by comparing your labels to the patient demographics at the top.
 - e. Click the radial button next to specimen. Click ADD at the bottom. A window will open to add a specimen.
 - f. Collection Location: choose from drop box.
 - g. Specimen number: scan EPIC test label.
 - h. Collection D/T: collection date must be correct; time must be correct for re-type specimens. When you correct any of these, you will get a "reason" box. Choose "A".
 - i. Phlebotomist: always use EPIC.
 - j. Container type: LAV or LAV/ARM
 - k. Barcoded Armband: If you choose LAV/ARM, you must scan the **barcoded number** (ZIP...) on the specimen using the HCLL scanner.
7. Tab to History Check. Document that you have performed a history check by choosing Performed.
8. Click OK.
9. Click SAVE at bottom.

B. TRAUMA AND COMPUTER DOWNTIME COLLECTIONS

(not able to obtain an EPIC blood bank label)

NOTE: This procedure utilizes the handwritten peel-off label with a unique identification number.

This procedure must be completed by 1 person who does not leave the patient's side.

1. Identify patient by asking the patient their first and last name and to spell it if necessary AND date of birth and view their hospital wrist band. If they cannot state their name, the patient may be identified by a hospital wrist band and verified by an RN.
All forms of identification must be identical.
2. Print only the patient's first and last name, date of birth, medical record number (zeros in front of the number are not needed), date and time drawn, and YOUR initials on the Typenex armband in indelible ink. PRINT CLEARLY AND FIRMLY.
3. Perform venipuncture, obtain one full 6 ml purple top.
4. Peel the adhesive label off the Typenex band and place on the EDTA tube of blood, this will leave a carbon imprint on the armband on the patient.
5. Place Typenex band on patient's arm or leg. Wrap band once around patient's wrist or ankle, number side out, so that tape lies between both front and rear guides.
6. Press firmly to seal plastic closure. The band becomes tamper proof when the clip is closed.
7. Cut or tear remaining numbers from armband to send to lab with the specimen.

Laboratory personnel receiving specimens:

Blood bank specimens must be received in the laboratory module of EPIC before being received in HCLL.

PROCEDURE:

1. Make sure the Blood Bank specimen is labelled with all the correct information. Specimens, that may lead to the patients receiving blood products, must include the following:
 - a. Correctly spelled first and last name
 - b. Correct date of birth
 - c. Correct MRN (zeros before the number are not necessary)
 - d. Date and Time of Collection
 - e. Qualified Collector's Initials
2. If any of the required information is incorrect or omitted with the exception of the time which may be corrected by the person who drew the specimen, the specimen must be rejected. Record information in Riskman which will be reviewed by the Laboratory Director.
3. Ensure that **all** collection information is correct in EPIC and print an instrument ready blood bank label.
4. Take all labels, specimen, and wristband stickers to the Blood Bank and spin for 10 minutes in the blood bank centrifuge.

Blood bank personnel receiving specimens:

- A. Repeat steps 1-2 as above.
- B. Perform a **history check** on the patient as previously stated above.

Notes:

- Trauma patient's usually start out receiving O negative units and if the Rh type is confirmed as Rh positive, they can be safely switched to receiving O positive units. This will be done regardless of the Rh type once the O negative stock is exhausted.
- For Traumas/MTP's with no identification (i.e. Jane/John Doe), the patient will be given a generic medical record number and date of birth. All testing and products will use this identification.

- When the patient's true identification has been found, the records will be merged in EPIC and will also merge in HCLL. The patient must then be recollected and the type and screen repeated. We cannot give blood products labeled for 'John Doe' to 'James Smith'.
- Continue issuing uncrossmatched, O negative red cell units to 'Jane/John Doe' under emergency procedures on downtime until the new Type and Screen can be completed with the patient's real name, DOB, and MRN.
- Be aware that multiple units may change the patient's blood type with mixed field results. If possible, only switch from O negative to O positive red cell units.

C. REBANDING PATIENTS WITH BARCODED BLOOD BANK BANDS:

1. Nursing must:
 - a. Determine that a blood bank barcoded band needs to be removed due to edema, lack of or interference with IV access, etc.
 - b. Notify the blood bank at telephone extension 4412 that a patient needs to have his/her blood bank barcoded band removed and replaced.
2. Phlebotomy will:
 - a. Redraw a new Type and Screen and place a new barcoded band on the patient. A new order will need to be placed in EPIC. See CPGH.701.030 Collecting and receiving Blood Bank Specimens.

Notes:

- Specimens must be stored in the blood bank for 7 days' post transfusion.
- Blood Bank specimens with barcodes are only good for 3 days for transfusion purposes. Patients must be redrawn and re-banded for a new type and screen after 3 days if they are to receive blood products.
- If a patient is discharged and readmitted, even if it is within the 3-day window, they must be redrawn and the type and screen repeated for the transfusion of blood products. This does not apply to pre-admit or oncology patients. See LAB.701.410 Type and Screen Guidelines.

REVISION

RESPONSIBILITY: Medical Director of Laboratory, Blood Bank Supervisor and/or designee(s)

REFERENCES:

Typenex Blood Recipients Identification Bands, Code 4R4608, Baxter Healthcare, Fenwal Division, Deerfield, Ill.
Standards for Blood Banks and Transfusion Services, 33rd Edition, AABB, Bethesda, MD, 2022
Technical Manual 20th Edition, AABB, Bethesda, MD, 2020
HCLL Training Manual, 2017.

Formerly BB-558 – Revised: 6/95, 9/98, 12/97, 12/98, 5/03, 11/04, 5/06, 12/07