GUIDELINES FOR ISSUING AND RETURNING BLOOD COMPONENTS AND BLOOD PRODUCTS WITHIN A FACILITY

1. Policy Statement

1.1 A policy shall be in place to ensure traceability of all blood components and blood products from the time of issue to the final disposition.

1.2 A policy shall be in place to ensure safe transfusion practices in the issuing of blood components and blood products from the Transfusion Medicine Laboratory. Each facility shall have an established policy/procedure identifying:

1.2.1 Qualified health professionals who are permitted to issue or sign out blood components or blood products from the Transfusion Medicine Laboratory

1.2.2 Transportation guidelines when transporting blood components or blood products to the recipient or transfusion location

1.2.3 Acceptable time frames for blood component or blood product transfusions to be completed based on the release time from the Transfusion Medicine Laboratory

1.2.4 Processing and storage procedures for blood components or blood products once they have been released from the Transfusion Medicine Laboratory

1.3 A policy shall be in place to ensure unused blood components and blood products returned to the Transfusion Medicine Laboratory are suitable to be returned to inventory.

2. Definitions

2.1 **Compatibility Label/tag:** tag or label attached to a blood component or product that has been designated for a specific recipient, specifying information that identifies the blood component or blood product for that recipient.

2.2 **Issue:** the release of blood components and blood products from the Transfusion Medicine Laboratory.

2.3 **Release:** the act of assessing blood components and/or blood products and making them available for use.

2.4 **Request Form:** a request for preparation or transfusion of a blood component or blood product generated in response to a transfusion order written by a licensed physician or physician delegate.

2.5 **Transfusionist:** health care professional who administers the blood transfusion.

2.6 **Transfusion Medicine Laboratory:** Hospital Blood Bank.

3. General Information

3.1 Incomplete requests for blood components or blood products will not be processed for issue.

3.2 Blood components and blood products shall only be released from the Transfusion Medicine Laboratory when all specifications for collection, processing and testing have been met except in life threatening situations and with documented approval of the physician of the recipient of the intended transfusion.

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3.3 Blood components and blood products shall only be issued by qualified transfusion laboratory staff or qualified healthcare professionals who have been trained in the issuing process and have authority to sign blood components or blood products out from the Transfusion Medicine Laboratory. Their identity must be documented in this process.

3.4 Blood components and blood products should be issued to one recipient at a time. Issue only one unit of red cells at a time from the Transfusion Medicine Laboratory. Multiple units may be issued to a single patient in an emergency or in a transfusion area that has a monitored storage area.

3.5 Blood components and blood products should be returned directly to the Transfusion Medicine Laboratory immediately if the decision is made not to transfuse

3.6 If the transfusion cannot be initiated promptly, blood components and blood products should be returned to the Transfusion Medicine

Laboratory, unless the transfusion can be completed within 4 hours from the time of removing the product from controlled temperature storage.

3.7 When blood components or blood products are returned to the Transfusion Medicine Laboratory specific criteria have to be met before returning to inventory for re-issue.

3.8 Blood components or blood products that have been out of temperature controlled storage greater than thirty minutes shall not be returned to inventory or re-issued and shall be discarded by the Transfusion Medicine Laboratory as per facility policy.

4. Quality Control

4.1 Each facility shall have policies that address the qualifications of healthcare professionals to perform, verify and manage transfusion medicine practices.

4.2 Only trained healthcare professionals shall release and issue blood from the Transfusion Medicine Laboratory. A registry of all signatures, initials and computer identification codes of all transfusion laboratory personnel shall be available.

4.3 Blood components and blood products should only be issued immediately prior to the transfusion in order to maintain proper storage conditions.

4.4 Unequivocal identification of the recipient and the blood component and blood product which compares the recipient's identification with the issue voucher and the compatibility label/tag must be performed prior to the issue of a blood component and/or product.

4.5 If any discrepancy is found in patient identification or with the blood component and or blood product, the blood component and or blood product shall not be issued until the discrepancy is resolved and an occurrence report should be completed.

4.6 All blood components and blood products being issued must be documented prior to release from the Transfusion Medicine Laboratory.

5. Process or Procedure

5.1 Procedure for Issuing Blood Components and Blood Products

5.1.1 Provide the Transfusion Medicine Laboratory with a written or computer generated request for blood components or blood products to be issued.
The Request shall include:

- The recipient's name
- The recipient's identification number
- The required blood component or blood product and dosage
- Special requirements
- Clinical indication
- Date and time of the request and intended transfusion if available
- The recipient's location

Note: Intravenous Immune Globulin requires completion of a separate request form.

5.1.2 Verify the following prior to retrieving the blood component or blood product from the Transfusion Medicine Laboratory:
5.1.2.1 Informed consent has been obtained and is on the recipient's health record
5.1.2.2 Recipient is available in the treatment area
5.1.2.3 Recipient's armband is affixed
5.1.2.4 IV access is established
5.1.2.5 Recipient's baseline vital signs are stable and documented
5.1.2.6 Pre medications are administered

5.1.3 Retrieve the requested blood component or blood product from the appropriate controlled storage area within the Transfusion Medicine Laboratory as per facility policy.

5.1.4 Visually inspect blood components and/or blood products and document the inspection prior to releasing the blood component or

blood product from inventory. If the blood component or blood product does not pass the visual inspection, it must not be issued.

5.1.5 Confirm the identification of the recipient and the blood component or blood product with the request requisition and compatibility label/tag at the time of release if required by facility policy. Verify:
5.1.5.1 Recipient's name
5.1.5.2 Recipient's identification number
5.1.5.3 Recipient's ABO/Rh group are compatible
5.1.5.4 Blood component or blood product number
5.1.5.5 Expiry date
5.1.5.6 Date and time of issue
5.1.5.7 Compatibility status

5.1.6 Resolve any identified discrepancies' prior to the release of blood components or blood products.

5.1.7 Ensure a compatibility label/tag is securely attached to the blood component or blood product prior to issue.

5.1.8 Document the release of the blood component or blood product from the Transfusion Medicine Laboratory including your signature if you are required by your regional policy to issue and release blood components and/or blood products from the Transfusion Medicine Laboratory.

5.1.9 Transport the blood component or blood product to the intended site, preferably to the transfusionist without delay.

5.2 Procedure for Returning Blood Components and Blood Products

5.2.1 Verify that the blood component or blood product has not been issued from a controlled environment for more than thirty minutes.

5.2.2 Return the blood component or blood product to the Transfusion Medicine Laboratory or the appropriate storage area as per regional facility policy.

5.2.3 Document the date and time the blood component or blood product is returned to the Transfusion Medicine Laboratory as per regional facility policy.

5.2.4 Complete an Occurrence Form as per facility procedure if required.

6. Records Management

6.1 All transfusion records in the recipient's medical chart shall be retained in accordance with health care facility policy.

6.2 A complete record pertaining to the identification of the blood component including Transfusion Medicine Laboratory testing results and worksheets and the collecting facility shall be retained indefinitely.

6.3 The recipient transfusion data file in the Transfusion Medicine Laboratory shall be retained indefinitely.

6.4 For each blood component issued, a record system shall be in place which documents :

6.4.1 Recipient's name and identification number
6.4.2 Recipient's ABO group
6.4.3 Recipients Rh group
6.4.4 Identification number and name of blood component
6.4.5 ABO group of the blood component
6.4.6 Rh group of the blood component for red cells, platelets and granulocytes
6.4.7 Compatibility verification for red cells and granulocytes
6.4.8 Visual inspection
6.4.9 Date and time of issue
6.4.10 Identity of the person issuing the blood component
6.4.11 Identity of the person transporting the blood component to the recipient's location

6.5 For each blood product issued , a record system shall be in place which documents:

6.5.1 Recipient's name and identification number
6.5.2 Blood product name and manufacturer

6.5.3 Lot number
6.5.4 Volume and /or potency
6.5.5 Dosage/vials issued
6.5.6 Visual inspection
6.5.7 Date and time of issue
6.5.8 Identity of the person issuing the blood product
6.5.9 Identity of the person transporting the blood product to the recipient's location.

6.6 Records of inspection of blood components and blood products prior to issue shall be retained for five years.

6.7 Records for all facilities shall ensure that it is possible for blood components and blood products to be traced from its source to final disposition. The record system must provide a means to locate and access all records related to a given blood component or blood product. These records must be kept indefinitely. The Transfusion Medicine Laboratory shall develop and maintain records that demonstrate that the quality system is operating in an effective manner.

6.8 Healthcare employee signatures, initials and computer identification shall be retained for ten years.

7. References

7.1 Canadian Society for Transfusion Medicine. CSTM standards for hospital transfusion service. Version 3.0. Ottawa: Canadian Society for Transfusion Medicine; 2011.

7.2 Canadian Standards Association. Blood and blood components, Z902-10. Mississauga (ON): Canadian Standards Association; 2010.

7.3 Manitoba Provincial Blood Programs Coordinating Office. Manitoba transfusion medicine best practice resource manual for nursing. Version 1.Winnipeg (MB): Manitoba Provincial Blood Programs Coordinating Office; June 2007.

7.4 Newfoundland and Labrador Provincial Blood Coordinating Program. Policy for blood component and blood product administration. Version 3.0. St. John's (NL). Newfoundland and Labrador Provincial Blood Coordinating Program; 2010.

7.5 Roback, J., Combs, M., Grossman, B., & Hillyer, C. Technical manual. 16th ed. Bethesda, Maryland: AABB; 2008.

7.6 TRAQ Program of the British Columbia Provincial Blood Coordinating Office. Technical resource manual for hospital transfusion services, 2nd edition. British Columbia: British Columbia Provincial Blood Coordinating Office; 2005.