STANDARD OPERATING PROCEDURE FOR ISSUING BLOOD COMPONENTS AND BLOOD PRODUCTS
TITLE: STANDARD OPERATING PROCEDURE FOR ISSUING BLOOD COMPONENTS AND BLOOD PRODUCTS

1.0 Principle
To ensure safe transfusion practices in the issuing of blood components and blood products from the Transfusion Medicine Laboratory.

2.0 Scope and Related Policies
2.1 Requests for blood components or blood products shall contain sufficient information to allow for unequivocal identification of the recipient. Incomplete requests will not be processed.

2.2 There must be documentation to confirm that blood components and blood products have been visually inspected before release.

2.3 Blood components and blood products shall only be issued by qualified Transfusion Medicine 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.

2.4 Under exceptional circumstances it may be necessary to issue blood components before all the routine tests are performed by the blood supplier or the pre-transfusion testing is complete. Each facility must have a standard operating procedure for issuing blood components in an emergency situation.

2.5 Related Standard Operating Procedures:
2.5.1 NL2010-012 Determining Specimen Suitability
2.5.2 NL2010-013 Patient History Check

3.0 Specimens N/A
4.0 Materials

4.1 Laboratory Information System (LIS), if applicable.

4.2 Written or computer generated request containing patient identification information.

4.3 Blood component or blood product requested.

4.4 Compatibility label/tag (Issue/Transfusion Card).

5.0 Quality Control

5.1 Blood components and/or blood products that do not meet visual inspection criteria must not be issued for transfusion.

5.2 Any discrepancies in recipient’s identification on the written request, LIS (if applicable), and the compatibility label/tag must be resolved prior to issuing blood components and blood products.
6.0 Process Flowchart

6.1 Process Flow

Review Request for Blood Components / Products

Is request complete?

Yes

Obtain required information

No

Perform Patient History Check

Is pre-transfusion sample acceptable?

Yes

Retrieve compatible blood components/ products

No

Collect new sample

Select oldest component/ product first

Was component modified?

Yes

Ensure label indicates modification performed

No

Perform and document visual inspection

Was inspection acceptable?

No

Do not issue

Yes

Verify all information matches

No

Resolve discrepancy before issuing

Attach compatibility label/ tag to blood component/ product

Return request with blood component/ product to recipient location
7.0 Procedure

7.1 Review request (written or computer generated) for blood components and/or blood products. The request shall include the following:

7.1.1 Recipient’s name
7.1.2 Recipient’s identification number
7.1.3 The type of blood component or blood product being requested
7.1.4 Dosage or volume required
7.1.5 Date and time of the request
7.1.6 Date and time of intended transfusion, if available
7.1.7 Special requirements
7.1.8 Recipient’s location.

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

7.2 Review the recipient’s transfusion history to confirm that the date of collection and the date of the transfusion/infusion are within the acceptable time period, and to check recipient’s ABO/Rh group to determine the compatible component to issue.

7.3 Ensure the date of the pre-transfusion sample is within an acceptable time frame.

7.3.1 Specimens for compatibility testing shall be collected within 96 hours prior to transfusion from a recipient:

7.3.1.1 who has been transfused with a blood component containing red cells within the last 3 months.
7.3.1.2 who has been pregnant in the last 3 months.
7.3.1.3 whose transfusion or pregnancy history is questionable or unavailable.

Note: If red cells are requested after the 96 hours a new specimen must be collected and a type and screen preformed on the new specimen.

7.3.2 For recipient’s who have not been transfused or pregnant in the past 3 months, specimens can be used for a time specified by the Transfusion Medicine Laboratory policy. This process should define the maximum time that samples can be stored at 1º - 6ºC and used for compatibility testing after the initial ABO, Rh and antibody screen have been done. If subsequently transfused, the 96 hour rule applies after first exposure to blood and blood components containing red blood cells.
7.4 Retrieve the correct quantity and type of blood component or product from the appropriate storage area using the information on the request.
   • Issue autologous or directed units first, if applicable.

7.5 Check the expiry date of the blood component or blood product and issue the oldest unit or product first.

7.6 If the blood component has been modified (i.e. washed, pooled or aliquotted) check that the modified label is attached to the unit. (See Procedural note 9.1).

7.7 Perform and document visual inspection of the blood component or blood product.

   **Note:** If the blood component or blood product does not pass visual inspection it must not be issued.

7.8 Check the information on the compatibility label/tag against the information on the blood component or blood product and the recipient’s identification on the request.

7.9 Attach a compatibility label/tag securely to all blood components and blood products issued.

   7.9.1 The following information shall be on the compatibility label/tag for blood components:
      7.9.1.1 Recipient’s name and identification number
      7.9.1.2 Recipient’s ABO group (for red cells, cryoprecipitated AHF, cryoprecipitate, and platelets)
      7.9.1.3 Recipient’s Rh (for red cells and platelets)
      7.9.1.4 Recipient’s compatibility status (for red cells)
      7.9.1.5 Rh group of the blood component (for red cells and platelets)
      7.9.1.6 Date and time of issue
      7.9.1.7 Unit number or pooled unit number.

   7.9.2 The following information shall be on the compatibility label/tag for blood products:
      7.9.2.1 Recipient’s name and identification number
      7.9.2.2 Lot/unique blood product identification number
      7.9.2.3 Type of blood product
      7.9.2.4 Volume/unit of dosage
      7.9.2.5 Date and time off issue.
Note: All discrepancies must be resolved prior to issuing blood components or blood product.

7.10 Return request with blood component or blood product to recipient’s location.

8.0 Reporting N/A

9.0 Procedural Notes

9.1 Blood components that have been modified shall have a new or additional label applied before being issued. The label shall include the following information, if applicable:

9.1.1 Name of the blood component
9.1.2 Number of units contained in the blood component
9.1.3 Modification performed
9.1.4 Name of the facility preparing the blood component
9.1.5 Unique identification number
9.1.6 Approximate volume
9.1.7 Date and time of expiry
9.1.8 ABO and Rh.

Note: The expiration date of the pooled component shall not exceed the expiration date of the oldest component in the pool.

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

9.3 Issue only one unit of red cells at a time from the Transfusion Medicine Laboratory. Multiple units may be issued to a single patient if they are rapidly bleeding or the transfusion area has a monitored blood storage fridge.

9.4 When a patient is transferred with blood components or blood products to another facility, the issuing facility is responsible for notifying the receiving facility. There shall be an agreement between the issuing facility and the receiving facility to ensure traceability of all blood or blood component to its final disposition.
9.5 When issuing blood products for home infusion:
   - The person transporting the product must provide identification and a signature must be obtained to receive products.
   - The person receiving the product must be given the appropriate instructions for storage and transportation for the product being issued.
   - The product must be delivered immediately to the recipient’s location.

10.0 Records Management

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

10.2 The recipient’s transfusion data file in the Transfusion Medicine Laboratory shall be retained indefinitely.

10.3 Documentation of staff qualifications, training and competency must be kept for ten years.

10.4 Records of inspection of blood component and blood products for five years.

10.5 For blood components that are modified the following information shall be in the records of the preparing facility:
   10.5.1 identification number of each blood component in the pool: and
   10.5.2 identification of the collection facility for each component in the pool.
10.6 For each blood component issued, a record system shall be in place which documents:
   10.6.1 Recipient’s name and identification number
   10.6.2 Recipient’s ABO group
   10.6.3 Recipients Rh group for red cells and platelets
   10.6.4 Identification number and name of blood component
   10.6.5 ABO group of the blood component
   10.6.6 Rh group of the blood component for red cells and platelets
   10.6.7 Compatibility verification for red cells
   10.6.8 Visual inspection
   10.6.9 Date and time of issue
   10.6.10 Identity of the person issuing the blood component
   10.6.11 Identity of the person transporting the blood component to the recipient’s location.

10.7 For each blood product issued, a record system shall be in place which documents:
   10.7.1 Recipient’s name and identification number
   10.7.2 Blood product name and manufacturer
   10.7.3 Lot number
   10.7.4 Volume and/or potency
   10.7.5 Dosage/vials issued
   10.7.6 Visual inspection
   10.7.7 Date and time of issue
   10.7.8 Identity of the person issuing the blood product
   10.7.9 Identity of the person transporting the blood product to the recipient’s location.

10.8 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 (i.e. transfusion). 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.
11.0 References


