



LB.67 The transfusion services develop a process for the issue of blood/blood component for transfusion.

- LB.67.1 There is a process for the issue of blood/blood component to ensure accurate identification of the intended recipient and the required blood components.
 - LB.67.2 The process ensures the integrity of the donor unit identification label and the recipient identification label.
 - LB.67.3 The process ensures confirmation that the donor's ABO/Rh is identical with the recipient's, or marked compatible.
 - LB.67.4 The process ensures proper documentation of the release event.
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Standard Intent:

Misidentification of patients or donor units causes the majority of acute hemolytic transfusion reactions. The best hope in preventing such a fatal reaction from occurring lies in detecting technical and clerical errors during the issue of the donor unit. Transfusion services must design a system to detect technical and clerical errors in donor unit identification and to ensure that blood is issued to the correct patient.

Blood and blood components must be visually inspected immediately before issue for transfusion or shipment to other facilities. Pre-issue inspection must be documented; records should include description of any abnormal units, action taken, and the identification of the personnel involved.

LB.68 The transfusion services develop a process for emergency release of uncross-matched or incompletely cross-matched blood.

- LB.68.1 There is a process for emergency release of uncross-matched or incompletely cross-matched blood that ensures a proper ordering procedure and required ordering information.
 - LB.68.2 The process considers age and sex factors.
 - LB.68.3 The process ensures ABO/Rh-D and labeling of the selected blood.
 - LB.68.4 The process ensures subsequent compatibility testing and notification of the results.
 - LB.68.5 The process ensures documentation of the release event (including the ordering physician signature).
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Standard Intent:

The intent of emergency blood release system is to establish a mechanism for making blood available in emergency situations with a minimum of delay. The physician requesting blood under this policy assumes full responsibility for administering the uncrossmatched or incompletely crossmatched to the patient. Normal Blood Bank documentation and crossmatching procedures.
