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**LB.62 The blood bank and transfusion services implement a system for receiving or sending blood and blood products to outside facilities.**

- LB.62.1 There are written blood supply/exchange agreements with outside facilities covering the following:
- LB.62.1.1 Agreement conditions (including accreditation status).
  - LB.62.1.2 Agreement on adequate blood/blood components inventory.
  - LB.62.1.3 Role of the involved parties in look back and transfusion transmitted diseases investigation.
  - LB.62.1.4 Release of blood, blood components or information to a third party.
  - LB.62.1.5 Validity of agreement and agreement review schedule.
  - LB.62.1.6 Resolving disputes.
- LB.62.2 There is a written procedure describing the process for requesting or releasing blood from or to outside facilities.
- LB.62.3 Policies and procedures on receipt and inspection of incoming blood/blood components include:
- LB.62.3.1 Evaluation and verification of the shipping condition of each blood component.
  - LB.62.3.2 Checking for meeting predefined acceptance criteria for each blood component received.
  - LB.62.3.3 Evaluation and verification of the agreement of units' identification information (unit numbers, ABO/Rh-D and Expiration dates).
  - LB.62.3.4 Conformation of ABO/Rh-D for RBC components.
  - LB.62.3.5 Actions taken for unsatisfactory consignment.
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**Standard Intent:**

Blood banks should maintain written contracts or agreements with transfusing facilities to define the expectations of the two parties involved and should be approved by the executive management of both facilities. The supplier may be another department within the same facility that is managed independently, or it may be another facility. The contracting facility assumes responsibility for ensuring compliance with all applicable standards and regulations.

Upon receipt of blood component from other facilities, each unit must be inspected for proper labeling and shipping conditions. Red blood cell component must be checked for abnormal appearance, observation for bag integrity, hemolysis, and clots. Comparison of bag and segment color should be performed to aid in detecting bacterially contaminated units.