LB.65.2 The process ensures the compatibility testing is performed on integrally attached segment from the donor's RBC unit.

LB.65.3 The process ensures the checking for presence, now or in the past, of clinically significant antibody in the patient's serum.

LB.65.4 The process ensures the proper labeling of cross-matched units with patient's name, patient's identification number and patient's ABO /Rh-D.

LB.66 The transfusion services develop a process for intra-uterine and neonatal testing and transfusion.

LB.66.1 There is a process for intra-uterine and neonatal testing and transfusion that entails determination of the neonate ABO/Rh and conditions for repeat of ABO/Rh testing.

LB.66.2 The process entails performance and interpretation of Direct Anti-globulin Test (DAT).

LB.66.3 The process describes conditions for omitting re-typing and serological cross-match.

LB.66.4 The process considers the clinically significant antibodies of maternal origin.

LB.66.5 The process describes selection of RBC and plasma components for top-up, exchange and intrauterine transfusions.

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.

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).

LB.69 The medical director of the transfusion services participates (through the blood transfusion committee) in the development of a process for the management of adverse or suspected transfusion events.

LB.69.1 There is a process for the management of adverse transfusion events which covers:

LB.69.1.1 Recognition and handling of adverse transfusion events.

LB.69.1.2 Reporting and monitoring of adverse transfusion events.