
 OSPITAL NG PARAÑAQUE 		Document Code: OSPAR- ANCI- LAB-2022-13
ANCILLARY DIVISION APPROVAL MATRIX Policy Title: POLICY ON BLOOD BANK		Issue Date:
		Section / Department LABORATORY SECTION
		Page 1 of 7
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BLOODBANK

PURPOSE:



General guidelines on blood banking and blood transfusion practices are established to ensure proper donor selection and blood collection, blood processing (including storage handling and transport) and utilization of blood and its components.

A. Examination and Procedures done

1. Blood typing–ABO typing ,Rh typing and reverse typing
2. BloodCrossMatching–
MajorCrossMatching,whichconsistsof3phases:
 - 2.1 Saline phase
 - 2.2 Albumin phase
 - 2.3 Human globulin phase
3. Direct Coomb's Test
4. Studying of Incompatibility Cross Matching

B. Collection and Handling of Specimens

1. All blood bank requests must be answered fully and correctly. The blood bank (BB) does not accept incomplete, incorrect and illegible requests. The requesting physician must duly sign the request. It should contain:
 - 1.1 The patient's name, age, sex, ward, room and bed number
 - 1.2 Classification of patient (department and whether service pay of inpatient)
 - 1.3 Type of examination (e.g. for blood typing, cross matching...)
 - 1.3.1 If for cross matching
 - 1.3.1.1 Kind of blood component (whole blood, packed RBC...)
 - 1.3.1.2 Amount of blood needed
 - 1.3.1.3 Date requested
 - 1.3.1.4 Indication for transfusion

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ANCILLARY DIVISION APPROVAL MATRIX		Issue Date:
Policy Title: POLICY ON BLOOD BANK		Section / Department LABORATORY SECTION
		Page 2 of 7
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1.3.1.5 Whether request is routine or stat(justify)

1.3.1.6 Signature of requesting physician

Service Responsible: Medical, Nursing

2. Routine request sent to the laboratory

2.1 Before 5:00am will be processed from 8:00 to 12:00 noon

2.2 Before 1:00pm will be processed from 1:00 to 4:00pm

2.3 Routine requests received after those periods will be processed late in the afternoon on the following day as the case may be.

Service Responsible: Nursing, Blood Bank

2.4 Routine request will be processed Mondays to Fridays 8:00am to 4:00 pm Saturdays 8:00 am to 10:00 am

Holidays and Sundays considered as STAT requests

Service Responsible : Blood Bank

2.5 Blood extractions for routine request is from 8:00 am to 10:00 am and 1:00 pm to 2:00 pm

2.6 All specimens should be collected in a plain tube properly labeled with the patient's name.

2.7 All STAT requests will be attended to immediately. The ward nurse will be notified as soon as the examination is done.

Service Responsible: Blood Bank



C. Recording and Releasing of Results

1. Two (2) copies of cross matching result forms will be made for every unit of blood that has been cross-matched. One (1) will be attached to the patient's chart and one (1) of the BB file.

2. The result should be printed on an official blood cross matching result form, taking attention on patient's data, blood type, compatibility result, blood unit serial number, blood unit expiration date, date cross matched, Med tech's signature.

3. The official results of cross matching are properly recorded in a logbook for file.

4. The official result of other examinations is properly recorded in a logbook for file and one copy is issued to be attached to the

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ANCILLARY DIVISION APPROVAL MATRIX		Issue Date:
Policy Title: POLICY ON BLOOD BANK		Section / Department LABORATORY SECTION
		Page 3 of 7
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patient's file/chart.

Service Responsible: Blood Bank

- If the result form issued is misplaced or lost, the person making the request makes a justification for a duplicate result. The duplicate copy is unsigned.

Service Responsible: Nursing, Medical, Blood Bank

D. Storage and Disposal of Specimens

- All specimens are stored in the BB refrigerator and will be automatically discarded after 3 days.
- All results are checked by the BB staff before discarding the red tubes and slides used in the examination.

Service Responsible : Blood Bank

E. General Rules for Blood Transfusion

- Requests for blood should be made by the requesting physician or by the nurses-on-duty signed by the requesting physician.

Service Responsible: Medical, Nursing

- Only the ward personnel are allowed to get the blood from the blood bank.

Service Responsible: Nursing



- Blood units will be issued with the corresponding result/transfusion record in a duplicate copy.

Service Responsible: Nursing

- The medical technologist issuing the blood should sign the crossmatch in the result form/transfusion record for date and time of issuance of the blood unit.

BEFORE ISSUANCE OF BLOOD RE-CHECK THE FF.

- Blood type
- Source of blood

 OSPITAL NG PARAÑAQUE 		Document Code: OSPAR- ANCI- LAB-2022-13
ANCILLARY DIVISION APPROVAL MATRIX		Issue Date:
Policy Title: POLICY ON BLOOD BANK		Section / Department LABORATORY SECTION
		Page 4 of 7
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- Blood component
- Expiration date
- Cross matching result
- Volume

5. Blood bank logbook is available for the ward personnel to sign upon receipt of the blood unit.
6. Except for massive emergency transfusion, only one unit of blood shall be issue date any one time.

Service Responsible: Blood Bank

7. Blood awaiting transfusion must always be kept in the blood bank refrigerator and NO unit should be removed until immediately prior to transfusion. Ordinary ward refrigerators are NOT SUITABLE for blood storage. Never take more blood from the BB than you anticipate using within the next 1 hour.

Service Responsible: Medical, Nursing, Blood Bank



8. Blood shall be administered as soon as possible after issue. If it is not possible to begin the transfusion within 30 minutes, blood shall be refrigerated in the ward refrigerator with precautions to prevent contamination.

Service Responsible: Nursing

9. If blood issued to the ward is not used, it must be returned back to the BB within 30 minutes. The blood should be inspected for hemolysis or gross contamination before acceptance and reissue. Such return-reissue of the blood shall be recorded in the BB logbook.

Service Responsible :Medical, Nursing

10. All blood transfusion must be set up by both the physician and the nurse who signs the transfusion record.
11. The following items must be checked before each blood pack set-up, recheck as for:

 OSPITAL NG PARAÑAQUE 		Document Code: OSPAR- ANCI- LAB-2022-13
ANCILLARY DIVISION APPROVAL MATRIX		Issue Date:
Policy Title: POLICY ON BLOOD BANK		Section / Department LABORATORY SECTION
		Page 5 of 7
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- Patient's identity—name, ward, etc...
- Blood type
- Blood serial number
- Quality of pack—seal intact ,not expired.

12. Commence transfusion after a good normal saline drip to avoid waste of blood from failure to find a suitable vein.

13. The patient undergoing transfusion has to be closely observed by the nurse/medical clerk/medical intern during the whole procedure noting the BP, PR, RR and temperature. Any untoward reactions (chills, fever, pain, circulatory collapse, etc...) should be reported at once to the attending physician and the transfusion must be stopped immediately. The vein may be kept open with NSS. The blood unit should be returned to the BB for studies.

Service Responsible: Nursing

14. Used empty blood bags shall be kept in the ward refrigerator for the least 24 hours so that specimen can be taken in case of hemolytic transfusion reaction and the accuracy of the cross matching needs assessment.



15. Blood awaiting transfusion must always be kept in the blood bank refrigerator and NO unit should be removed until immediately prior to transfusion. Ordinary ward refrigerators are NOT SUITABLE for blood storage. Never take more blood from the BB than you anticipate using within the next 1 hour.

Service Responsible: Medical, Nursing, Blood Bank

16. Blood shall be administered as soon as possible after issue. If it is not possible to begin the transfusion within 30 minutes, blood shall be refrigerated in the ward refrigerator with precautions to prevent contamination.

Service Responsible: Nursing

17. If blood issued to the ward is not used, it must be returned back to the BB within 30 minutes. The blood should be inspected for hemolysis or gross contamination before

 OSPITAL NG PARAÑAQUE 		Document Code: OSPAR- ANCI- LAB-2022-13
ANCILLARY DIVISION APPROVAL MATRIX Policy Title: POLICY ON BLOOD BANK		Issue Date:
		Section / Department LABORATORY SECTION
		Page 6 of 7
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acceptance and reissue. Such return-reissue of the blood shall be recorded in the BB logbook.

Service Responsible: Medical, Nursing



18. All blood transfusion must be set up by both the physician and the nurse who signs the transfusion record.
19. The following items must be checked before each blood pack set-up, recheck as for:
 - Patient's identity—name, ward, etc...
 - Blood type
 - Blood serial number
 - Quality of pack—seal intact, not expired.
20. Commence transfusion after a good normal saline drip to avoid waste of blood from failure to find a suitable vein.
21. The patient undergoing transfusion has to be closely observed by the nurse/medical clerk/medical intern during the whole procedure noting the BP, PR, RR and temperature. Any untoward reactions (chills, fever, pain, circulatory collapse, etc...) should be reported at once to the attending physician and the transfusion must be stopped immediately. The vein may be kept open with NSS. The blood unit should be returned to the BB for studies.

Service Responsible :Nursing

22. Used empty blood bags shall be kept in the ward refrigerator for the least 24 hours so that specimen can be taken in case of hemolytic transfusion reaction and the accuracy of the cross matching needs assessment.
23. In the event of a transfusion reaction, the ward nurse shall notify the blood bank proper investigation. The blood transfusion record must be completely filled up and returned to the BB together with the blood unit with the transfusion set and needle intact. Otherwise, the BB will not accept it since it will no longer be fit for examination especially for blood culture.

Service Responsible: Nursing

24. Blood acquired from commercial sources will not be accepted.

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		Page 7 of 7
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Service Responsible: Medical, Nursing, Blood Bank ,Administrative

F. Special Rules for Blood Transfusion

1. Blood must be used wisely. If transfusion is really required for anemic patients, packed red blood cells should always be used.
2. If fresh whole blood (less than 6 hours) is to be requested, justification is needed as to the special and unusual clinical condition which the attending physician believes cannot be met by the use of stored blood or its components. Otherwise, the whole blood will be issued.
3. The blood bank must be notified within one hour of cancellation of surgery with request to blood to avoid unnecessary usage of laboratory reagents.

Service Responsible: Medical

4. In emergencies, uncross matched or partially cross matched but type-specific blood may be released by the BB, only upon the statement of the attending physician that the situation is critical and require immediate release of such blood. The attending physician should fill up the corresponding request form with justification for emergency use of blood. The requesting (attending) physician must accept the responsibility for the extra risk involved in the transfusion. Cross matching is continued, the result is relayed as soon as done.

Service Responsible: Medical, Blood Bank

5. Unless a special request is made to retain the blood for a particular patient, all reserved blood will be freed after 3 days and returned to the blood pool.

Service Responsible: Medical, Blood bank