APPENDIX F
VISTA BLOOD BANK USER MANUAL
INTENDED USES

Preface

Directions for Use

The Laboratory Planning and Implementation Guide Version 5.2 of the Laboratory software application provides detailed instructions on implementation of the software application and file setups.

The Blood Bank User Manual Version 5.2 provides detailed information and specific examples of data entry for each option. This manual is targeted toward the end users of the software and explanations are geared to the medical technologist, Blood Bank supervisory and/or Blood Bank Medical Director.

The Release Notes and Implementation Guide for Patch LR*5.2*72 includes an itemized listing of the data dictionary, option, and functionality changes, as well as instructions for implementation. Since Release Notes usually include information on other modules in addition to Blood Bank, the sections applicable to Blood Bank are also documented in Appendix D of the Blood Bank User Manual.

In addition, all patch messages for the Blood Bank module are prepared in a standardized format and include directions for the Blood Bank staff as well as for the Laboratory Information Manager and/or Information Resource Management (IRM) staff.

Intended Uses

The intended uses for the ***VISTA*** Blood Bank Software V. 5.2 are detailed in the following sections by major function, (i.e. donor, inventory and patient). For each major function, a descriptive listing of the data elements for the file is provided, followed by a detailed listing of software limitations and a table of intended uses.

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VISTA Laboratory Blood Bank Version 5.2 Software Intended Uses

Introduction

The delivery of quality healthcare services to eligible veterans is one of the primary missions of the Department of Veterans Affairs (DVA). Within the DVA, the Veterans Health Administration (VHA) operates the largest centrally directed electronic healthcare information system in the United States. The electronic information systems provide vital support to the delivery of healthcare to veterans at 173 Veterans Administration Medical Centers (VAMCs), 389 outpatient clinics, 131 nursing homes, and 39 domiciliaries.

In 1982, VHA committed to building an electronic healthcare architecture titled Veterans Health Information Systems and Architecture (**V*ISTA***), formerly Decentralized Hospital Computer Program (DHCP). The focus of the program was the implementation of software modules that were easily integrated into a complete electronic hospital information system. By 1990, VHA had upgraded computer capacity at all VAMCs, and is now implementing software on a national scale that supports integrated healthcare delivery. All VA facilities have been integrated for the past eight years with a digital communications network. Through enhancement of its data transport utility, Patient Data Exchange (PDX), VA healthcare facilities can exchange health summaries containing relevant clinical data across the VA network. As VHA evolves into a managed care organization, the information network capabilities will provide support for health plan business elements in all operational and patient care support areas.

In developing **V*ISTA*** software, VHA established the following criteria for design and integration:

- Software applications that are standardized and able to be exported to all VAMCs.
- Technical integration through the use of a common database, programming standards and conventions, and data administration functions.
- Functional integration through utilities such as order entry/results reporting and flexible healthcare summaries.
- Standard data elements.
- Timely access to data.

- Equipment and software specifications that avoid dependence on a single vendor.

- A system that is easy to use for the information resources manager and the healthcare professional.

- System integrity and protection of data against loss and unauthorized change, access or disclosure.

Blood Banking involves many sophisticated analyses that, without automation/ computerization, can only be performed by highly skilled persons. The human ability to "look for things" is more flexible than a computer's; but the ability to be flexible and intelligently search for and analyze information starts to break down as the quantity of information becomes larger. Computers, however, can handle vast amounts of information without suffering any deleterious effects. Therefore, a sophisticated computer system allows the highly trained technical staff to devote more time and energy to those problems and sophisticated analyses that are not yet within the realm of a computer.

The goals of the *VISTA* Blood Bank software are to:

- Improve the safety of blood/blood component transfusion by decreasing the number and severity of errors, through retrieval of previous records, verification of present results, detection of inconsistencies in data, bar code entry of unit ID, ABO/Rh, etc., and computer assisted donor labeling.

- Improve the quality of patient care through evaluation of transfusion appropriateness flags for specific components, and evaluation of transfusion increments.

- Decrease the clerical workload through bar code entry of unit information, printing of transfusion requests, transfer of information to multiple records and preparation of labels for specimens and unit tags.

- Improve resource management through statistics by location, physician, and/or treating specialty, through access of information by other medical staff and by optimizing inventory control.

While the computerizing of any system can require changes in that system, this module has been designed to impose no substantive changes in the actual workflow. With the exception of the actual worksheets for recording tests results and interpretations, the majority paper documents will be replaced by the computer.

Hardware Sizing Model

Platform size and disk capacity was chosen based on internal VA sizing algorithms which measure the mission, size, and complexity of all VHA facilities. Hardware was initially distributed from a centralized purchase which provided DEC Alpha systems for the largest 108 facilities and Intel based PC systems for the remaining (at that time) 64 hospitals. Local facilities are authorized to accommodate local needs or to improve performance as required.

In 1982, the Department of Medicine and Surgery within the Department of Veterans Affairs developed a planning tool for estimating resource requirements for ***VISTA***. The planning tool is called the "sizing model". The "sizing model" is composed of algorithms for each software application that use workload data to calculate resource requirements for the VAMCs. All VAMCs were assigned a "Class" status based on the first sizing model results. Class I facilities were considered to have the largest resource needs and Class V were considered to have the smallest. Computing equipment to support the CORE applications, including the Laboratory software application was distributed with respect to class status. At that time, the Laboratory software application did not include Blood Bank software.

Over the following years, the scope of ***VISTA*** grew. The CORE applications were enhanced and new applications were added (both clinical and administrative). A second sizing model was developed in 1986 applying the same principals used for the first sizing model. However, the first sizing model addressed five applications, the second sizing model covered thirty. The first sizing model took into account a dozen input variables, the second employed nearly two hundred workload indicators. Application specific algorithms were developed using input from software application developers, subject matter experts, and hospital system managers who were already supporting these applications in a production environment. Each application is addressed separately with a computed expression for processing power, disk storage, video terminal, and printer requirements. Therefore, site specific requirements can reflect the particular mix of applications relevant to each unique setting.

The sizing model results are in terms of central processing through-put units (TUs), disk capacity, terminal and printer requirements. For the model, the PDP 11/44 processors are used as the benchmark for comparisons. One TU may be considered as equivalent to one quarter of the processing power of four networked PDP 11/44 processors. Estimates indicated that twenty users simultaneously accessing the central processing unit would use one TU. The Alpha equipment currently in use has a capacity approximately twenty times greater than the PDPs.

Information was collected from a variety of sources, including Automated Management Information System (AMIS) workload reports. In order to verify the accuracy of the input data, each site was given the opportunity to review and correct its own data profile. Corrections were made based on site input including supporting documentation and certification by the facility Director.

Accuracy of the sizing model predictions has been confirmed for applications that are in current production use. The sizing model process is inherently dynamic, with progressive refinement resulting from increasing understanding, continual change resulting from events at each site, and periodic revision by the Capacity Management and Planning group at the San Francisco Chief Information Officer Field Office (CIOFO).

The sizing model was again updated in 1995. The use of bar code readers were optional at that time and not included in this model. This issue will be revisited based on the upcoming conversion from Codabar to ISBT Code 128, which has a significant impact on the length and complexity of the unit ID numbers.

1. Blood Bank Data

   a) Total # crossmatches (taken from FY95 AMIS Segment H29)
   b) Total # blood donors (taken from FY95 AMIS Segment H29)
   c) Number of technicians working in the blood bank during the day

2. Blood Bank Equations

   a) Blood Bank through-put units (TU)
   ((CRTs + PRTs)/25) + (Crossmatches/200,000)

   b) Blood Bank Disk

      Algorithm is based on # crossmatches and # donors.
      Each crossmatch test requires 2.5K of storage (considering both the BLOOD INVENTORY file (#65) and the LAB DATA file (#63)) and each blood donor requires 0.2K of storage. The result is divided by 1000 to indicate megabytes. A constant of 1MB is added.

   c) Blood Bank CRTs

      Algorithm is based on # crossmatches, # donors, and maximum # techs on duty in Blood Bank at one time
      For sites with Blood Bank activity and less than 1800 donors, allow one CRT for every two techs, with a minimum of one CRT.
      For sites with more than 1800 donors/year, an additional CRT is added.

NOTE: This is based on the type of data entry and the limitations detailed in Section IX Functional Requirements.

d) Blood Bank Printers
Algorithm is based on the # crossmatches, with a minimum of one

NOTE: This assumes that Blood Bank is in close proximity to other laboratory sections and that label printers can be shared.

Since the Blood Bank software represents only one component of the much larger hospital system, hardware considerations must be viewed in context. Although a TU can be calculated for each facility based on an appropriate algorithm, the adequacy of this measure is better reflected in terms of response time and the availability of CRTs.

Number of Users

The number of users who can access the system simultaneously is controlled by the number of available CRTs. Since the Blood Bank software is part of an integrated hospital computer system involving over thirty software applications, the total number of CRTs and users is beyond the scope of control of Blood Bank or even the Pathology & Laboratory Medicine Service. However, the number of CRTs needed to support the Blood Bank software is provided by the sizing model as indicated above.

Response Time

The integrated system provides dynamic adjustments of resources that provide optimum response time to on-line users. Performance monitoring tools allow each individual site to monitor and review response time to provide less than two second average responses, with an optimum target of under one second for responses. System load is balanced to provide acceptable response for printing labels and reports for users.

Storage Capacity

VHA Directive 10-95-094, dated September 28, 1995, provides instructions for archiving and purging data to relieve current disk storage limitations. Health care facilities are instructed to ensure that the presence of historical data in the **V***IST***A** databases does not adversely impact the ability to store current patient and administrative data. Data elements not specifically detailed in this directive represent completed actions, are not otherwise subject to retention requirements and are considered purgeable after 90 days or the time established by the software. If disk storage limitations are particularly severe, this period may be shortened on a case by case basis at the discretion of the Chief, Information Resources Management Service (IRM) and the Chiefs of the respective using Services, with the approval of the medical center Director. Data for blood donors, blood inventory, and patients are specifically detailed in this directive, and therefore, are not subject to routine purging.

As noted in the sizing model, it is possible to predict the amount of disk space required to support the Blood Bank software on an annual basis. The tools available as part of the Statistical Analysis of Global Growth software provide data such as number of entries, number of blocks currently in use, percent change in a single day, percent change in the last 28 days, etc. The tools may be used by the sites to assist in evaluating current and future needs.

A variety of options exist which provide purge and archive capabilities, some of which are in the main Laboratory software application and some of which are specific to the blood bank software. Each of these options is discussed below. In general, data for the BLOOD INVENTORY file (#65) and the BLOOD DONOR file (#65.5) can be printed and purged as detailed below. However, patient data that is stored in the LAB DATA file (#63) is maintained on-line permanently. A listing of the data elements for each of these files is included in Section IX Functional Requirements.

The Purge Old Orders and Accessions [LROC] option is an interactive manual purge of the old data in the ACCESSION file (#68) and LAB ORDER ENTRY file (#69.9) within the Laboratory software application. No patient test data is purged with this option. The amount of data retained is site definable via the Grace Period For Orders field (#15), in the LAB ORDER ENTRY file (#69.9). Access to this option requires a higher level of security and is generally restricted to the IRM staff. This purge includes orders for blood bank tests; however, this is included in the limitations detailed in Section IX Functional Requirements.

The Laboratory Archiving enhancement provided in patch LR*5.2*59 provide archiving capability for the WKLD DATA file (#64.1) and the LAB MONTHLY WORKLOADS file (#67.9). Since this global/file can grow quite large as it holds data on each test performed within the lab, archiving/purging is necessary to control its growth.

The VA FileManager Extract Tool is used to move data from the source file to a destination (archive) file. After the data has been copied to external media, the data can then be purged from the source file. A variety of reporting capabilities is available for the archived data; however, the data cannot be restored to the source file. This purge includes blood bank workload; however, this data is collected for purely administrative/ management purposes and has no relation to any safety critical functional requirements. The Purge Data Found in the Search [LR ARCHIVE PURGE] option is used to archive laboratory data for patients based on an algorithm and site defined parameters. Blood bank data is not included in this algorithm (i.e., only data for CH subscript tests is evaluated and included in the archive/purge).

The Purge the Cumulative File [LRAC PURGE] option is used to purge entries in the CUMULATIVE file (#64.7) based on an algorithm and site defined parameters for the grace period. Patient lab test data is not removed is stored in the LAB DATA file (#63). Blood bank data is not included in this algorithm (i.e., only CH and MI subscript tests are included in the cumulative report). Blood bank test reports are generated via a separate option and data is pulled directly from the LAB DATA file (#63).

The Remove inappropriate transfusion requests [LRBLSRI] option is used to purge inappropriate transfusion requests which are identified and flagged based on site defined audit criteria. Access to this option requires a higher level of security than the majority of the blood bank options. This option should be run periodically as necessary, usually on a monthly basis. Before running the Remove inappropriate transfusion requests [LRBLSRI] option, sites should generate the Inappropriate Transfusion Requests Report [LRBLPRIT] option. The removal of the listing of the inappropriate requests does not affect actual component request information.

The Remove units with final disposition [LRBLSER] option is used to remove data from the BLOOD INVENTORY file (#65) when a final disposition has been entered. Prior to using this option, the Print units with final disposition [LRBLRUF] option **must** be executed. This option identifies those units which meet the criteria (i.e., a final disposition has been entered to provide a hard copy document of all data in the BLOOD INVENTORY file (#65) for each unit sorted by unit number which can be retained in accordance with record retention requirements). Removing units from the BLOOD INVENTORY file (#65) does not affect a patient's transfusion record. Access to the Remove units with final disposition [LRBLSER] option requires a higher level of security than the majority of the blood bank options. The frequency by which this option is used is determined by the site. However, based on the minimal amount of space used by the LRD global where the data for the BLOOD INVENTORY file (#65) is stored, adequate storage capacity exists to provide on-line storage for many years, though not necessarily indefinitely. On-line storage is preferable in order to expedite access to data in the event that a unit is identified through 'look back' procedures. If so desired, the growth of this global can be monitored by the IRM at the site on a regular basis.

The Remove ex-donors [LRBLDK] option is used to remove donors from the BLOOD DONOR file (#65.5). Prior to using this option sites **must** execute the Print ex-donor [LRBLDEX] option. The Print ex-donor [LRBLDEX] option will identify donors who meet the remove ex-donors criteria, (i.e., no donations since the date specified by the site and to provide a hard copy document of all data in File (#65.5) for each donor sorted by donor which can be retained in accordance with record retention requirements). Access to the Remove ex-donors [LRBLDK] option requires a higher level of security than the majority of the blood bank options.

The frequency with which this option is run is determined by the site; however, based on the minimal amount of space used by the LRE global where the data for File (#65.5) is stored, adequate storage capacity exists to provide on-line storage for many years, though not necessarily indefinitely. On-line storage is preferable in order to expedite access to data in the event that a donor is identified through 'look back' procedures. If so desired, the growth of this global can be monitored by the IRM at the site on a regular basis.

The Remove data change audits [LRBLAR] option is used to remove the entries on the audit trail which are created based on algorithms included in the software for tracking changes in specific data.

NOTE: See Section IX Functional Requirements for a detailed listing of the fields for the BLOOD DONOR file (#65.5), BLOOD INVENTORY file (#65), and LAB DATA file (#63).

In some cases, the algorithm is part of the routine and in some cases, it is part of the input template. The entries for the audit trail are stored in the LAB SECTION PRINT file (#69.2), Data Change Date field (#999) is stored by ACCESSION AREA. Recommendations are for the Print data change audits [LRBLAD] option to be run on a regular basis as part of the supervisory review. The frequency by which the entries on the audit trail are removed is determined by the site and should be related to the procedures for retaining the hard copies of the audit trail report and the record retention policy at the site. Access to this option requires a higher level of security than the majority of the blood bank options. Deletion of the entries on the audit trail does not affect the appearance of comments automatically generated regarding changes in verified data for the patient test results entered through the Enter test data [LRBLPET] option, including ABO, Rh, antibody screening and direct antiglobulin testing. On the Blood Bank Tests Report, the comments will still appear indicating both the new result and the original result even after the entry on the audit trail has been deleted.

A. Blood Donor Functions

1. BLOOD DONOR file (#65.5) Description of Data Elements

Field#	Field Help Prompt Description	Data Type (PM=Pattern Match)
.001	IDENTIFICATION NUMBER TYPE A WHOLE NUMBER BETWEEN 1 AND 999999999 This is a unique number assigned to the blood donor. An existing number cannot be assigned to a new donor.	NUMBER
.01	NAME NAME MUST BE 3-30 CHARACTERS, NOT NUMERIC OR STARTING WITH PUNCTUATION Name of blood donor	FREE TEXT
.02	SEX This is the sex of the blood donor.	SET 'M' FOR MALE; 'F' FOR FEMALE;
.03	DOB This is the age of the donor. (Must be 17 years or older.)	DATE (PM= Exact date (with month and day) required and echo the answer)
.031	AGE This is the computed age of the donor. Algorithm: TODAY-DOB/365.25 (always 0 decimal digits)	COMPUTED
.04	APHERESIS CODE If donor is willing donate plasma, platelets, or leukocytes enter 'YES'	SET '1' FOR YES; '2' FOR NO; '1' FOR yes; '2' FOR no;
.05	ABO GROUP The ABO group of the donor is entered here	SET 'A' FOR A; 'B' FOR B; 'O' FOR O; 'AB' FOR AB;
.06	RH TYPE The RH type of the donor is entered here	SET 'POS' FOR POSITIVE; 'NEG' FOR NEGATIVE;
.07	CUMULATIVE DONATIONS TYPE A WHOLE NUMBER BETWEEN 0 AND 9999999 Total number of donation credits based on values assigned to each type of donation.	NUMBER

Field#	Field Name Help Prompt Description	Data Type
.08	TOTAL AWARDS TYPE A WHOLE NUMBER BETWEEN 1 AND 99999 Number of awards given based on 1 award for each gallon or equivalent (8 donation credits) donated	NUMBER
.085	GIVE NEW AWARD To acknowledge giving award delete entry by entering '@'	SET '1' FOR YES;
.09	DEMOG ENT/EDIT BY Person entering or editing donor demographic data	POINTER TO NEW PERSON FILE(#200)
.1	PERMANENT DEFERRAL If the donor is to be permanently excluded from donation enter 'YES' Donor should be permanently deferred as a homologous blood donor based on donor history or test results.	SET '1' FOR YES; '0' FOR NO;
.11	DATE REGISTERED/EDITED DATE DONOR IS ENTERED/EDITED IN THE FILE This is the date the donor was registered into this file.	DATE (PM= Exact date (with month and day) required, time allowed and echo the answer)
.12	DEFERRAL ENTER/EDIT BY Person entering or editing permanent deferral of donor.	POINTER TO NEW PERSON FILE (#200)
.13	SSN ANSWER MUST BE 9-10 CHARACTERS IN LENGTH This field contains the social security number of the donor. NOTE: The entry for the FORUTH DEFAULT for DONOR in the LABORATORY SITE file (#69.9) controls whether this field is included in the input template.	FREE TEXT
.14	MILITARY RANK Answer must be 2-20 characters in length. If this collection is being performed by a DOD site, the rank of the donor is entered in this field. NOTE: The entry for the SECOND DEFAULT for DONOR in the LABORATORY SITE file (#69.9) controls whether this field is included in the input template.	FREE TEXT
.16	PERMANENT DEFERRAL DATE CHANGE If the deferral date is adjusted, the date is entered in this field.	DATE (PM= Exact date (with month and day) required, time allowed and echo the answer)

Field#	Field Name Help Prompt Description	Data Type
1.1	ADDRESS LINE 1 ANSWER MUST BE 1-30 CHARACTERS IN LENGTH First line of donor address	FREE TEXT
1.2	ADDRESS LINE 2 ANSWER MUST BE 1-30 CHARACTERS IN LENGTH Second line of donor address (if necessary)	FREE TEXT
1.3	ADDRESS LINE 3 ANSWER MUST BE 1-30 CHARACTERS IN LENGTH Third line of donor address (if necessary)	FREE TEXT
1.4	CITY ANSWER MUST BE 1-30 CHARACTERS IN LENGTH City of donor	FREE TEXT
1.5	STATE State of donor residence	POINTER TO STATE FILE (#5)
1.6	ZIP CODE ANSWER MUST BE 5-9 CHARACTERS IN LENGTH Zip code of donor	FREE TEXT
1.7	HOME PHONE ANSWER MUST BE 3-15 CHARACTERS IN LENGTH Home phone of donor	FREE TEXT
1.8	WORK PHONE ANSWER MUST BE 3-15 CHARACTERS IN LENGTH Phone where donor works so that the donor may be reached during working hours if necessary	FREE TEXT
2	GROUP AFFILIATION (Subfile 65.51) Multiple	POINTER
	.01 GROUP AFFILIATION These are groups with which the donor may be associated.	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
	.02 FULL NAME	COMPUTED
3	DONOR SCHEDULING (Subfile 65.52)	Field Not in Use
	.01 BLOOD DONOR COMMENTS	Field Not in Use

Field#	Field Help Prompt Description	Data Type
4	DONOR SCHEDULING/RECALL (Subfile 65.53) Multiple	SET
	.01 DONOR SCHEDULING/RECALL	SET '1' FOR JAN; '2' FOR FEB; '3' FOR MAR; '4' FOR APR; '5' FOR MAY; '6' FOR JUN; '7' FOR JUL; '8' FOR AUG; '9' FOR SEP; '10' FOR OCT; '11' FOR NOV; '12' FOR DEC; '13' FOR 7/4; '14' FOR LABOR DAY; '15' FOR XMAS; '16' FOR EMERGENCY;
	These are donors placed on a specific recall list for recruitment purposes.	
5	DONATION OR DEFERRAL DATE (Subfile 65.54) Multiple	DATE
	.01 DONATION OR DEFERRAL DATE	DATE (PM = Exact date (with and day) required and echo the answer; allows dates up to and including the current date)
	These are the dates of donation or deferral. Date when a person appears for donation. If no donation then this date is the deferral date; otherwise it is the donation date.	
	.011 DONATION ENTERED/EDIT BY	POINTER TO NEW PERSON FILE (#200)
	Person entering or editing donation information.	
	.02 COLLECTION SITE	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
	Site at which a donation attempt is made.	
	.03 DONATION GROUP	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
	Group affiliation for which a donation attempt is made.	
	.13 ARRIVAL/APPT TIME	DATE (PM = Exact date (with month and day) required and echo the answer; allows dates up to and including the current time)
	Future date/time not allowed. This is the date/time the donor arrives for an appointment to donate.	

Field#	Field Help Prompt Description	Data Type
	.14 ENTRY VIA OLD RECORDS	SET '1' FOR YES; '0' FOR NO;
	If data entry for donation/deferral date subfield is by way of the enter old records option, a 'YES' is entered in this field.	
	1 DONATION/DEFERRAL CODE	SET 'W' FOR WHOLE BLOOD; 'P' FOR PLASMAPHERESIS; 'C' FOR CYTAPHERESIS; 'N' FOR NO DONATION;
	This is the result of donation attempt. If donation successful, the type of donation is entered.	
	1.1 DONATION TYPE	SET 'H' FOR HOMOLOGOUS; 'A' FOR AUTOLOGOUS; 'T' FOR THERAPEUTIC; 'D' FOR DIRECTED;
	This is the donation type.	
	1.2 RESTRICTED FOR	FREE TEXT
	If autologous donation donor must be the same as the patient If autologous donor must also be the patient selected. If directed donation can be any patient selected.	
	2 DEFERRAL REASON (Subfile 65.55)	POINTER
	Multiple .01 DEFERRAL REASON	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
	These are the reasons for which the donor is deferred.	
	3 DONOR REACTION CODE	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
	Any adverse reaction which the donor might have suffered during or immediately following the blood donation.	
	4 UNIT ID	FREE TEXT
	UNIQUE ID ASSIGNED TO PRIMARY UNIT Enter ID that component(s) prepared from donation will be labeled. This determines that the donor ID assigned to another donation within the past 5 years will not be allowed.	
	4.1 PRIMARY BAG	SET '1' FOR SINGLE; '2' FOR DOUBLE; '3' FOR TRIPLE; '4' FOR QUADRUPLE; '5' FOR QUINTUPLE;
	This is the type of bag used for the collection of the donor blood.	

Field#	Field Help Prompt Description	Data Type
4.11	ANTICOAGULANT/ADDITIVE	SET '1' FOR CPD; '2' FOR ACD; '3' FOR CPDA-1; '4' FOR ADSOL;
	This is the type of anticoagulant in the collection bag.	
4.15	BAG LOT #	FREE TEXT
	ANSWER MUST BE 1-15 CHARACTERS IN LENGTH This is the lot number of the collection bag. NOTE: The entry for the THIRD DEFAULT for DONOR in the LABORATORY SITE file (#69.9) controls whether this field is included in the input template.	
4.2	DATE/TIME COLLECTION STARTED	DATE (PM=Exact date (with month and day) and time required and echo the answer)
	Date AND time must be entered !! This is the date and time the donation was started.	
4.3	DATE/TIME COLLECTION COMPLETED	DATE (PM=Exact date (with month and day) and time required and echo the answer)
	This is the date and time the donation was completed.	
4.4	DATE/TIME PROCESSED	DATE (PM=Exact date (with month and day) and time required and echo the answer; allows dates up to and including the current time)
	DATE AND TIME COLLECTION WAS PROCESSED Date/time at which the component preparation started.	
4.5	COLLECTED PRIMARY UNIT WT (gm)	NUMBER
	WEIGHT IN GRAMS OF COLLECTION INCLUDING CONTAINER TYPE A NUMBER BETWEEN 1 AND 9999 This is the gross weight of the unit collected.	
4.6	EMPTY PRIMARY UNIT WT (gm)	NUMBER
	WEIGHT IN GRAMS OF COLLECTION CONTAINER TYPE A NUMBER BETWEEN 1 AND 1000 Weight of the empty donor bag (primary bag only).	
4.7	COLLECTION VOL (ml)	NUMBER
	TYPE A WHOLE NUMBER BETWEEN 1 AND 9999 Volume of blood collected (ml) Algorithm: (Volume = collected primary unit wt (gm) minus empty primary unit wt (gm) divided by 1.06)	

Field#	Field Help Prompt Description	Data Type
	4.8 PROCESSING TECH Person performing the component preparation.	POINTER TO NEW PERSON FILE (#200)
	5 PATIENT CREDIT Enter patient for donation credit Patient for whom a unit of blood was donated, i.e. to whom should the "replacement" be credited.	FREE TEXT
	6 PHLEBOTOMIST ANSWER MUST BE 2-30 CHARACTERS IN LENGTH Name of person performing the collection.	FREE TEXT
	6.1 COLLECTION DISPOSITION Records what happened to the collection.	SET '0' FOR PREPARE COMPONENT(S); '1' FOR QUARANTINE; '2' FOR DISCARD COLLECTION;
	6.2 COLLECTION DISPOSITION COMMENT (Subfile 65.546) Multiple .01 COLLECTION DISPOSITION COMMENT ANSWER MUST BE 2-80 CHARACTERS IN LENGTH These are comments regarding the collection disposition.	FREE TEXT
	7 RBC TYPING METHOD (Subfile 65.61)	Field Not in Use
.01	RBC TYPING METHOD	Field Not in Use
.02	TECHNIQUE	Field Not in Use
.03	TECHNOLOGIST	Field Not in Use
	1 ANTISERUM (Subfile 65.62)	Field Not in Use
	.01 ANTISERUM	Field Not in Use
	.02 LOT #	Field Not in Use
	.03 INTERPRETATION	Field Not in Use
	.04 IS	Field Not in Use
	.05 37 C	Field Not in Use
	.06 AHG	Field Not in Use
	.07 CONTROL CELL	Field Not in Use
	.08 ROOM TEMP	Field Not in Use
	.09 12-18 C	Field Not in Use
	.1 4 C	Field Not in Use
	8.1 DONOR CELLS+ANTI A	Field Not in Use
	8.2 DONOR CELLS+ANTI B	Field Not in Use
	8.3 DONOR CELLS+ANTI A,B	Field Not in Use
	8.4 DONOR PLASMA/SERUM+A1 CELLS	Field Not in Use
	8.5 DONOR PLASMA/SERUM+B CELLS	Field Not in Use
	9.1 DONOR CELLS+ANTI D	Field Not in Use
	9.2 DONOR CELLS+RH CONTROL	Field Not in Use

Field#	Field Help Prompt Description	Data Type
	9.3 DONOR CELLS+ ANTI D (37 C)	Field Not in Use
	9.4 DONOR CELLS+RH CTRL (37 C)	Field Not in Use
	9.5 DONOR CELLS+ANTI D (AHG)	Field Not in Use
	9.6 DONOR CELLS+RH CTRL (AHG)	Field Not in Use
	10 ABO INTERPRETATION	SET 'A' FOR A; 'O' FOR O; 'B' FOR B; 'AB' FOR AB; 'ND' FOR NOT DONE;
	INTERPRETATION OF ABO TESTING This is the interpretation of ABO grouping results.	
	10.2 TECH ENTERING-ABO INTERP	POINTER TO NEW PERSON FILE (#200)
	This is the technologist entering ABO interpretation.	
	10.3 ABO TESTING COMMENT	FREE TEXT
	ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the ABO testing.	
	10.4 ABO INTERPRETATION RECHECK	SET 'A' FOR A; 'O' FOR O; 'B' FOR B; 'AB' FOR AB;
	Recheck of ABO group interpretation.	
	10.5 TECH ENTERING-ABO RECHECK	POINTER TO NEW PERSON FILE (#200)
	Technologist entering ABO grouping recheck.	
	10.6 ABO RECHECK COMMENT	FREE TEXT
	ANSWER MUST BE 1-80 CHARACTERS IN LENGTH. ABO grouping recheck comment.	
	11 RH INTERPRETATION	SET 'NEG' FOR NEGATIVE; 'POS' FOR POSITIVE; 'ND' FOR NOT DONE;
	INTERPRETATION OF RH TESTING This is the interpretation of Rh typing results.	
	11.2 TECH ENTERING-RH INTERP	POINTER TO NEW PERSON FILE (#200)
	This is the technologist entering Rh interpretation.	
	11.3 RH TESTING COMMENT	FREE TEXT
	ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the RH testing.	
	11.4 RH INTERPRETATION RECHECK	SET 'NEG' FOR NEGATIVE; 'POS' FOR POSITIVE;
	Rh interpretation recheck	

Field#	Field Name Help Prompt Description	Data Type
11.5	TECH ENTERING-RH RECHECK Technologist entering Rh type recheck.	POINTER TO NEW PERSON FILE (#200)
11.6	RH TESTING RECHECK COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH Rh testing recheck comment	FREE TEXT
12	SYPHILIS SEROLOGY This is the results of syphilis serology test.	SET '1' FOR REACTIVE; '0' FOR NEGATIVE; 'ND' FOR NOT DONE;
12.2	TECH-SYPHILIS SEROLOGY Technologist entering syphilis serology results.	POINTER TO NEW PERSON FILE (#200)
12.3	SYPHILIS SEROLOGY COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the syphilis serology test.	FREE TEXT
13	HBsAg Hepatitis B surface antigen These are the results of hepatitis B surface antigen testing.	SET '1' FOR REACTIVE; '0' FOR NEGATIVE; 'ND' FOR NOT DONE;
13.2	TECH-HBsAg Technologist entering Hepatitis B surface antigen test results.	POINTER TO NEW PERSON FILE (#200)
13.3	HBsAg COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the HBsAg test.	FREE TEXT
14	HIV ANTIBODY HUMAN IMMUNODEFICIENCY ANTIBODY These are results of HIV antibody testing.	SET '1' FOR REACTIVE; '0' FOR NEGATIVE; 'ND' FOR NOT DONE;
14.2	TECH-HIV Technologist entering HTLV-III test results.	POINTER TO NEW PERSON FILE (#200)
14.3	HIV TESTING COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the HIV test.	FREE TEXT

Field#	Field Name Help Prompt Description	Data Type
15	ANTIBODY SCREEN RESULT These are the results of antibody screening.	SET '0' FOR NEGATIVE; "1' FOR POSITIVE; 'ND' FOR NOT DONE;
15.2	TECH-ANTIBODY SCREEN Technologist entering antibody screening test results.	POINTER TO NEW PERSON FILE (#200)
15.3	ANTIBODY SCREEN COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the antibody screen.	FREE TEXT
16	HBcAb These are the results of hepatitis core antibody testing.	SET '1' FOR REACTIVE; '0' FOR NEGATIVE; 'ND' FOR NOT DONE;
16.2	TECH-HBcAb This is the technologist entering Hepatitis Core Antibody results.	POINTER TO NEW PERSON FILE (#200)
16.3	HBcAb TEST COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the HBcAb test.	FREE TEXT
17	ALT ALANINE-AMINO TRANSFERASE These are the results of alanine-amino transferase testing. NOTE: The entry for the FIFTH DEFAULT for DONOR in the LABORATORY SITE file (#69.9) controls whether this field is included in the input template.	SET '1' FOR ELEVATED; '0' FOR NOT ELEVATED; 'ND' FOR NOT DONE;
17.2	TECH-ALT This is the technologist entering alanine-amino transferase results.	POINTER TO NEW PERSON FILE (#200)
17.3	ALT TEST COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the ALT test.	FREE TEXT
18	HTLV-I ANTIBODY Results of HTLV-I antibody testing	SET '1' FOR REACTIVE; '0' FOR NEGATIVE; 'ND' FOR NOT DONE;
18.2	TECH-HTLV-I	POINTER TO NEW PERSON FILE (#200)
18.3	HTLV-I TESTING COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH	FREE TEXT

Field#	Field Name Help Prompt Description	Data Type
19	HCV ANTIBODY Results of hepatitis C virus (HCV) antibody testing are entered in this field.	SET '1' FOR REACTIVE; '0' FOR NEGATIVE; 'ND' FOR NOT DONE;
19.2	TECH-HCV ANTIBODY	POINTER TO NEW PERSON FILE (#200)
19.3	HCV ANTIBODY TESTING COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH.	FREE TEXT
20	HIV ANTIGEN NOTE: The entry for the SIXTH DEFAULT for DONOR in the LABORATORY SITE file (#69.9) controls whether this field is included in the input template.	SET '1' FOR REACTIVE; '0' FOR NEGATIVE; 'ND' FOR NOT DONE;
20.2	TECH-HIV ANTIGEN Technologist performing HIV antigen testing.	POINTER TO NEW PERSON FILE (#200)
20.3	HIV ANTIGEN COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH Comment related to HIV antigen testing.	FREE TEXT
66	BLOOD COMPONENT (Subfile 65.66) Multiple These are blood components prepared from the collection.	POINTER
.01	BLOOD COMPONENT The selection must be a blood component. Blood component prepared from collection.	POINTER TO BLOOD PRODUCT FILE (#66)
.02	COMPONENT DISP DATE/TIME DATE/TIME OF COMPONENT DISPOSITION Date/time at which component was released to stock, quarantined or discarded.	DATE (PM=Exact date (with month and day), time allowed and echo the answer; allows dates up to and including the current time)
.03	DATE/TIME STORED Date/time component stored.	DATE (PM=Exact date (with month and day), time allowed and echo the answer; allows dates up to and including the current time)
.04	EXPIRATION DATE	DATE (PM=Exact date (with month and day), time allowed and echo the answer; allows dates including the current and future times)

Field#	Field Name Help Prompt Description	Data Type
	Cannot enter expired components. Expiration date/time of component prepared.	
.05	COMPONENT VOL (ml) TYPE A WHOLE NUMBER BETWEEN 0 AND 500 Volume in milliliters (ml) of component prepared.	NUMBER
.06	TECH LABELING This is the person initially reviewing the donor results and, if appropriate, placing the correct labels on the component.	POINTER TO NEW PERSON FILE (#200)
.07	DISPOSITION TECH Person verifying that the donor results and the labeling are acceptable and that the component can be released to inventory.	POINTER TO NEW PERSON FILE (#200)
.08	COMPONENT DISPOSITION This is the disposition of component.	SET '0' FOR RELEASE COMPONENT; '1' FOR QUARANTINE; '2' FOR DISCARD;
1	COMPONENT DISPOSITION COMMENT (Subfile 65.67) Multiple	
.01	COMPONENT DISPOSITION COMMENT ANSWER MUST BE 2-80 CHARACTERS IN LENGTH This is the reason component quarantined or discarded.	FREE TEXT
2	SEDIMENTING AGENT	Field Not in Use
3	DRUG	Field Not in Use
70	GENERAL APPEARANCE	Field Not in Use for Data Storage
71	VENIPUNCTURE SITE	Field Not in Use for Data Storage
72	ORAL TEMPERATURE	Field Not in Use for Data Storage
73	BLOOD PRESSURE	Field Not in Use for Data Storage
74	PULSE	Field Not in Use for Data Storage

Field#	Field Name Help Prompt Description	Data Type
	74.3 PULSE COMMENT	Field Not in Use Storage
	75 WEIGHT (lb)	Field Not in Use for Data Storage
	80 HEMOGLOBIN	Field Not in Use for Data Storage
	81 HEMATOCRIT	Field Not in Use for Data Storage
	82 TOTAL SERUM PROTEIN	Field Not in Use
	83 SERUM PROTEIN ELECTROPHORESIS (Subfile 65.6)	Field Not in Use
	.01 SERUM PROTEIN ELECTROPHORESIS	Field Not in Use
	84 IgG	Field Not in Use
	85 IgM	Field Not in Use
	86 WBC	Field Not in Use
	87 POLYS	Field Not in Use
	88 EOSINOPHILS	Field Not in Use
	89 BASOPHILS	Field Not in Use
	90 LYMPHOCYTES	Field Not in Use
	91 MONOCYTES	Field Not in Use
	92 PLATELET COUNT	Field Not in Use
	500 WORKLOAD TEST/PROCEDURE (Subfile 65.599) Multiple Tests or procedures containing WKLD codes for donor workload are entered here.	POINTER
	.01 WORKLOAD TEST/PROCEDURE Tests or procedures containing WKLD codes for donor workload are entered here.	POINTER TO LABORATORY TEST FILE (#60)
	1 COMPLETE DATE/TIME (Subfile 65.5991) Multiple	
	.01 COMPLETE DATE/TIME Used for workload recording. If x-ref exists, workload needs to be counted.	DATE (PM=Exact date (with month and day) and time required and echo the answer)
	.02 TECH	POINTER TO NEW PERSON File (#200)
	1 WKLD CODE (Subfile 65.59911) Multiple	POINTER
	.01 WKLD CODE	POINTER TO WKLD CODE file(#64)
	.02 WKLD CODE COUNT Type a Number between 0 and 999, 0 Decimal Digits	NUMBER
	.03 CODE COUNTED	SET '1' FOR YES; '0' FOR NO;

Field#	Field Help Prompt Description	Data Type
6.1	RBC ANTIGEN PRESENT (Subfile 65.56) Multiple	POINTER
	.01 RBC ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	Antigens identified as present on the red blood cells of the donor. SNOMED codes can be entered as well as the name of the antigen. Synonyms can also be used if they are in the FUNCTION FIELD file (#61.3)	
	1 COMMENT	Field Not in Use
6.2	RBC ANTIGEN ABSENT (Subfile 65.57) Multiple for RBC Antigen absent	POINTER
	.01 RBC ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	1 COMMENT	Field Not in Use
6.3	HLA ANTIGEN PRESENT (Subfile 65.58) Multiple for HLA antigen present	POINTER
	.01 HLA ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	1 COMMENT	Field Not in Use
6.4	HLA ANTIGEN ABSENT (Subfile 65.59) Multiple for HLA antigen absent	POINTER
	.01 HLA ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	1 COMMENT	Field Not in Use
6.5	CMV ANTIBODY	SET '0' FOR NEG; '1' FOR POS;
	A negative or positive result for the Cytomegalovirus antibody	
9	BLOOD DONOR COMMENTS (Subfile 65.52)	
	.01 BLOOD DONOR COMMENTS	WORD-PROCESSING
	This field contains comments about the donor not found elsewhere.	
63	LABORATORY REFERENCE Field Not in Use	
99	PERMANENT DEFERRAL REASON (Subfile 65.99)	
	.01 PERMANENT DEFERRAL REASON	WORD-PROCESSING
	Reason(s) why donor is permanently deferred.	

2. BLOOD DONOR file (#65.5) Data Copied/Entered in BLOOD INVENTORY file (#65) Upon Labeling/Release of Unit

File 65 Field#	Field Name	File 65.5 Field of Data Origin	Data Copied/Entered
.01	UNIT ID	Subfile 65.54,4	Exact
.02	SOURCE	NA	Assigns Self
.03	INVOICE#	NA	Assigns 00
.04	COMPONENT	Subfile 65.66,.01	Exact
.05	DATE/TIME RECEIVED	Subfile 65.66,.02	Exact
.06	EXPIRATION DATE/TIME	Subfile 65.66,.04	Exact
.07	ABO GROUP	Subfile 65.54,10	Exact
.08	RH TYPE	Subfile 65.54,11	Exact
.11	VOLUME (ml)	Subfile 65.66,.05	Exact
.16	DIVISION	NA	Assigns based on division of user releasing unit
8	RESTRICTED FOR	Subfile 65.54,1.2	Exact if data exists, i.e., directed or autologous unit
8.1	POS/INCOMPLETE SCREENING TESTS	NA	Assigns'YES' based on established algorithm
10	ABO INTERPRETATION	Subfile 65.54,10	Exact IF recheck is designated for transfer based on site parameter File setup
10.2	TECH ENTERING-ABO INTERP	Subfile 65.54,10.2	Exact IF recheck is designated for transfer based on site parameter File setup
10.4	ABO MOVED FROM DONOR FILE	NA	Assigns 'YES' if data is transferred

File 65 Field#	Field Name	File 65.5 Field of Data Origin	Data Copied/Entered
11	RH INTERPRETATION recheck	Subfile 65.54,11	Exact IF is designated for transfer based on site parameter File setup
11.2	TECH ENTERING-RH INTERP	Subfile 65.54,11.2	Exact IF recheck is designated for transfer based on site parameter File setup
11.4	RH MOVED FROM DONOR FILE	NA	Assigns 'YES' if data is transferred
60	RBC ANTIGEN PRESENT (Subfile 65.04)		
	.01 RBC ANTIGEN PRESENT	Subfile 65.56,.01	Exact
70	RBC ANTIGEN ABSENT (Subfile 65.05)		
	.01 RBC ANTIGEN ABSENT	Subfile 65.57,.01	Exact
80	HLA ANTIGEN PRESENT (Subfile 65.08)		
	.01 HLA ANTIGEN PRESENT	Subfile 65.58,.01	Exact
90	HLA ANTIGEN ABSENT (Subfile 65.09)		
	.01 HLA ANTIGEN ABSENT	Subfile 65.59,.01	Exact
91	CMV ANTIBODY	Subfile 65.5,6.5	Exact

Software Limitations

Functionality	Description of Software Limitations
Donor - Registration, Screening and Collection	No evaluation of donor screening responses. No evaluation of donor history/physical results. No evaluation of volume of blood drawn. No evaluation of frequency and timing of autologous donations. No automatic updating of deferral status. No automatic updating and evaluation of donor recruitment/recall information based on actual donation data. No evaluation of information regarding confidential self-exclusion. No provision of an electronic system of records for donor medical history information. No provision of an electronic system of records of therapeutic phlebotomy requests. Partial provision of an electronic system of records for apheresis procedures.
Donor - Component Preparation	No system of blood component quality control records. No evaluation of components which can be prepared bas on an evaluation of donation types. Partial system for evaluating mutually exclusive components.
Donor Processing/Transfusion Transmitted Disease Marker Testing	No evaluation of results to determine requirements for repeat and/or confirmatory testing. No evaluation of quality control results to validating runs. No provision for test result interpretation based on actual testing results, (e.g. evaluation of actual instrument readings or reactions of antisera). Manual entry of test result interpretations for all required testing, (i.e., no instrument interfaces). Manual entry of ABO/Rh confirmation testing (rechecks). No provision for donor notification of abnormal test results. No provision for notification of recipient's physician if test result is reactive for unit which was labelled/released with incomplete testing. No system for proficiency testing.
Donor Phenotyping	Manual entry of test result interpretations.

Functionality	Description of Software Limitations
Donor Labeling/Release	No system for quarantining of in-date units based on donor look-back procedures. No provision for determining the suitability for subsequent transfusion of units prepared from therapeutic phlebotomy. No system for ensuring application of biohazard labels to autologous units when appropriate.
Donor Records	No provision of an electronic system of records for donor medical history information. No provision of an electronic system of records for confidential self-exclusion. No provision of an electronic system of records of therapeutic phlebotomy requests. Partial provision of an electronic system of records for apheresis procedures. No automatic updating of deferral status. No system of blood component quality control records. No provision system of records for actual test results, (i.e., manual entry of test result interpretations for all required testing). No system for tracking disposal of discarded units. No provision for documentation of indication for emergency issue of incompletely tested units.

Intended Uses

IU#	Functionality	Description of Intended Uses
D1	Donor-General	Provision of a unique cumulative donor record for each individual blood donor/patient based on data elements detailed above for the BLOOD DONOR file (#65.5).
D2	Donor - General	Provision of a unique cumulative donation sub-record for each individual donation/deferral date.
D3	Donor- General	Tracking of the donation type for each donation, i.e., homologous, autologous, therapeutic, or directed.
D4	Donor - General	Record updates immediately upon data entry.
D5	Donor - General	Tracking of the person performing various steps in the process, i.e., the person entering the data into the computer.
D6	Donor - General	Accommodation of a bar code reader for entry of the unit ID.
D7	Donor-General	Tracking of changes in verified data for specific data elements defined for the BLOOD DONOR file (#65.5) as detailed in Section IX under Functional Requirements
D8	Donor-General	Maintenance of donor confidentiality by providing different levels of security access such that the type of data access can be defined by individual user.
D9	Donor-General	Minimal potential for data entry errors based on control of the data type and the input format through the use of a highly structured data dictionary and input transforms.
D10	Donor - General	Limited simultaneous access by multiple terminals/ users to the same donor record for purposes of data entry in specified options.
D11	Donor-Old Records	Entry of historical donor information if deemed appropriate and identification of the specific donation dates for which data was entered via that option.
D12	Donor-Old Records	Check of the unit IDs during data entry of each unit ID, to determine if that unit ID is already in existence in the BLOOD INVENTORY file (#65) in order to identify potential duplicates/inappropriate entries.
D13	Donor-Old Records	Restricted access to donor through the 'Old records' option once the donor record has been created.
D14	Donor-Registration, Screening and Collection	Check the existing entries in the BLOOD DONOR file (#65.5) during the registration of each blood donor, to identify potential duplicate donors.
D15	Donor - Registration, Screening and Collection	Evaluation of the donation intervals for allogeneic (homologous) blood donors.
D16	Donor-Registration, Screening and Collection	Calculation of the age of donor based on his/her date of birth and subsequent evaluation of the age of the donor to see if outside defined limits, (i.e., ≤17 or >65 years of age).

IU#	Functionality	Description of Intended Uses
D17	Donor-Registration, Screening and Collection	Site specific control to edit the donor history questions at the discretion of the facility in order to meet changes in regulatory and accrediting agency requirements. (Requires higher security level).
D18	Donor-Registration, Screening and Collection	Site specific control to edit the donor consent in order to meet changes in regulatory and accrediting agency requirements. (Requires higher security level)
D19	Donor - Registration, Screening and Collection	Donor specific donor history form which contains the donor demographics, date of last donation and site specific donor history questions and site specific donor consents.
D20	Donor - Registration, Screening and Collection	Identification of donors who have been placed in a 'permanent deferral' status and flagging of those donors when appropriate.
D21	Donor - Registration, Screening and Collection	Provision of a report of permanently deferred donors for use at remote sites where the computer system is not accessible and/or preprinted donor history forms may not be available for all potential donors.
D22	Donor - Registration, Screening and Collection	Entry of collection data through routinely used options restricted if allogeneic (homologous) donor is permanently deferred.
D23	Donor-Registration, Screening and Collection	Warning message; if an autologous donor or therapeutic phlebotomy patient who is permanently deferred is selected for data entry.
D24	Donor - Registration, Screening and Collection	Entry of special comments for future reference so that donors who require special handling can be identified and appropriate procedures can be implemented.
D25	Donor - Registration, Screening and Collection	Provision of link between autologous donor/patient in an effort to ensure that autologous units are made available for a patient before allogeneic (homologous) blood is selected.
D26	Donor - Registration, Screening and Collection	Identification of units collected in bags of a specific lot in case of potential recalls.
D27	Donor - Registration, Screening and Collection	Calculation of collection volume based on the gross weight, the empty bag weight and the specific gravity of whole blood.
D28	Donor-Registration, Screening and Collection	Evaluation of unit ID to prevent assignment of "duplicate" unit IDs based on a search of existing entries in the BLOOD DONOR file.(#65.5)
D29	Donor-Registration, Screening and Collection	Free text special comments in the BLOOD DONOR COMMENTS field (#.01) for future reference
D30	Donor-Registration, Screening and Collection	Tracking of whether the donor had a donor reaction, making information available through a variety of report and inquiry options.
D31	Donor-Registration, Screening and Collection	Screen on entry of donation date/time to prevent entry of a future date.
D32	Donor-Registration, Screening and Collection	Screen on the entry of the collection completion date/time to ensure it is not prior to the collection start date/time.

IU#	Functionality	Description of Intended Uses
D33	Donor - Component Preparation	Tracking of all collection dispositions and tracks storage and disposition of all components prepared.
D34	Donor - Component Preparation	Tracking of the person performing various steps in the process, i.e. the person entering data into the computer.
D35	Donor-Component Preparation	Restricted access to the donor's most recent donation, (i.e., user cannot specify a unit ID) which is from other than the most recent donation.
D36	Donor - Component Preparation	Evaluation of the component preparation time to ensure that components are prepared within the maximum time allowable for that specific component.
D37	Donor - Component Preparation	Evaluation of the number of components prepared versus type of collection bag.
D38	Donor - Component Preparation	Exclusion of more than 1 RBC component for preparation from a donor unit.
D39	Donor - Component Preparation	Exclusion of incompatible components based on the anticoagulant of the donor unit and that of components being prepared.
D40	Donor - Component Preparation	Calculation of the date portion of the expiration date for each component based on the donation date and the specific component.
D41	Donor-Component Preparation	Tracking of data on the date/time stored for each specific component of a specific unit ID.
D42	Donor-Component Preparation	Evaluation of the elapsed time between the collection time and the date/time stored for the specific component to prevent entry of data for a component for which the maximum allowable component preparation time has been exceeded.
D43	Donor-Processing/TTD Marker Testing	Expedited data entry for donor IDs by incrementing the unit IDs and displaying that number as the default IF the next logical unit ID exists.
D44	Donor-Processing/TTD Marker Testing	Check of current ABO/Rh results for the specific donor unit against the donor's historical record.
D45	Donor-Processing/TTD Marker Testing	Comparison of the recheck information to original processing result interpretations if ABO/Rh unit rechecks are performed prior to the release of the unit to inventory, rather than after the unit is released to inventory and data is entered. **NOTE:** the original ABO/Rh are NOT displayed at the time of data entry.
D46	Donor-Processing/TTD Marker Testing	Comparison of the user identification and the entry in the tech field for the original results to prevent the same tech from entering both original and recheck results for ABO/Rh.
D47	Donor-Processing/TTD Marker Testing	Determination of whether ALT and HIV Ag testing is required, and specifically which of these fields should be accessible during data entry based on site specific parameters.
D48	Donor-Processing/TTD Marker Testing	Entry of test result interpretations for each unit ID, for subsequent evaluation during labeling/release, i.e., no batch entry.

IU#	Functionality	Description of Intended Uses
D49	Donor-Processing/TTD Marker Testing	Generation of worklists for any of the tests. These lists include any incomplete testing, i.e., unit IDs for which there are no test results or which were added back to the worklist pending completion of repeat and/or confirmatory testing.
D50	Donor-Processing/TTD Marker Testing	Automatic generation of a bulletin detailing the test result sent to all holders of a specific security key. If the results of the transfusion transmitted disease marker testing are entered as anything other than "negative" or "non-reactive" for units that have already been released to inventory on an emergency basis, regardless of the donation type.
D51	Donor-Processing/TTD Marker Testing	Restriction on the level of security access required to edit result interpretations after components have been released to inventory.
D52	Donor-Processing/TTD Marker Testing	Reports of donor testing results to allow data review before the actual labeling of the donor units if so desired.
D53	Donor Phenotyping	Use of a standardized coding system, i.e. SNOMED, for identifying both RBC and HLA antigens and antibodies
D54	Donor Phenotyping	Prevention of data entry which makes the same antigen both 'present' and 'absent'.
D55	Donor-Labeling/Release	No release of "duplicate" unit IDs to inventory.
D56	Donor-Labeling/Release	Release of units to inventory prohibited if no current ABO/Rh results exist.
D57	Donor-Labeling/Release	Transfer of selected data from the BLOOD DONOR file (#65.5) to the BLOOD INVENTORY file (#65) as detailed above.
D58	Donor-Labeling/Release	Release of units to inventory prohibited if the check of the current ABO/Rh results for the specific donor unit against the donor's historical record indicate a discrepancy and the ABO/RH recheck data is to be transferred to the BLOOD INVENTORY file (#65) when the unit is released.
D59	Donor-Labeling/Release	Automatic generation of a bulletin detailing the test result sent to all holders of a specific security key. If the check of the current ABO/Rh results for the specific donor unit against the donor's historical record indicate a discrepancy, but the ABO/RH recheck data is NOT to be transferred to the BLOOD INVENTORY file (#65) when the unit is released.
D60	Donor-Labeling/Release	Detailed reports of donor's historical ABO/RH, permanent deferral (if appropriate), test results and component information for review prior to labeling and/or for hard copy documentation.
D61	Donor-Labeling/Release	Evaluation of TTD marker testing results such that release of homologous, directed donor and therapeutic phlebotomy units with positive disease marker testing results is prevented.

IU#	Functionality	Description of Intended Uses
D62	Donor-Labeling/Release	Automatic quarantine of components if an attempt is made to label/release a unit for which the results indicate that the unit is not suitable for release to inventory, i.e. are positive or reactive.
D63	Donor-Labeling/Release	Requirement for a higher level of security access to make changes in the status of a component previously placed in 'quarantine'.
D64	Donor-Labeling/Release	Verification of the accuracy of labeling of ABO/Rh via bar code reader by comparing the scanned ABO/RH label to the ABO/RH results for that unit ID.
D65	Donor-Labeling/Release	Comparison of the identity of the user attempting to release the unit with the entry in the TECH LABELING field for that specific unit in order to prevent the same tech doing both labeling & verifying if labeling/release is done manually.
D66	Donor-Labeling/Release	Assignment of a final disposition of RELEASE to each component in the BLOOD DONOR file (#65.5) and automatic creation of a new entry in the BLOOD INVENTORY file (#65) with specific associated data elements for each component which is labeled/released.
D67	Donor-Labeling/Release	Assignment of the division of the user who is labeling/ releasing the unit into inventory to the unit when the unit is assigned a final disposition in the BLOOD DONOR file (#65.5) and unit is entered into the BLOOD INVENTORY file (#65).
D68	Donor-Labeling/Release	Tracking of both allogeneic (homologous) and autologous units which are released to inventory with incomplete transfusion transmitted disease marker testing such that those units are identified if subsequent attempts are made to modify the unit into another blood component or to ship the unit to another facility.
D69	Donor-Labeling/Release	For autologous units released to inventory with positive/ incomplete testing, release of the unit for use by other patients or modification of the unit into other non-autologous components is prevented.
D70	Donor-Labeling/Release	Transfer of ABO/Rh confirmatory testing results to the BLOOD INVENTORY file (#65) if appropriate based on the site parameters.
D71	Donor-Labeling/Release	Inclusion of the unit in the queue for the Inventory ABO/Rh worklist if the unit contains red cells and data for ABO/Rh confirmatory testing is not transferred to the Inventory based on the site parameters.
D72	Donor-Labeling/Release	For autologous and directed components, display of the name of the patient that the unit is 'RESTRICTED FOR' in an attempt to make sure that the unit is segregated appropriately.
D73	Donor-Records	On-line storage of a unique cumulative donor history for look-back purposes.

IU#	Functionality	Description of Intended Use
D74	Donor-Records	Generation of a hard copy printout of the cumulative donor history prior to removal of the donors from the computer system for those donors who have not donated since a specified date.
D75	Donor-Records	Mechanism for merging data (donation sub-records) from two donor records in the event that a duplicate donor record was created in error.
D76	Donor-Recruitment	Report of all donors who indicated a specific group affiliation to provide feedback to donor group chairpersons. Users can specify search criteria for the group affiliation and the range of donation/deferral dates to be included. Reports are sorted by group affiliation and include donor name, ABO/Rh, donation/deferral date, donation/deferral code, donor reaction code and deferral reason.
D77	Donor-Recruitment	Entry of data regarding donation group and collection site such that activity reports can be generated to provide feedback to donor group chairpersons. Users can specify search criteria based on the specific report selected. Reports include donor group affiliation, donation group and or collection site in addition to donor name, ABO/Rh, donation/deferral date, donation/deferral code, donor reaction code and deferral reason.
D78	Donor-Recruitment	Entry of standardized letters that can be generated, based on their group affiliation information, and used for specific targeted donor recruitment efforts.
D79	Donor-Recruitment	Entry of standardized letters, which can be generated, based on a search of all donors who lack a specific RBC antigen, and used for specific targeted donor recruitment efforts.
D80	Donor-Recruitment	Entry of standardized letters which can be generated based on a search of all donors who have not donated since a specified date to be used for specific targeted donor recruitment efforts.
D81	Donor-Recruitment	Generation of post visit thank you letters for donors who attempted to donate based on the list of donors created when the donation/deferral data was entered through the Donor registration [LRBLDLG] option.
D82	Donor-Recruitment	Generation of letters for various groupings of donors based on specified criteria and type of letter selected, inserting the donor name and address for the addressee for those donors identified in the search criteria.
D83	Donor-Recruitment	Generation of labels including the donor name and address for various groupings of donors based on specified criteria.
D84	Donor-Recruitment	Generation of a list of donors who have not donated since a specified date, including their name, date of last donation, group affiliation, home phone and work phone.

IU#	Functionality	Description of Intended Use
D85	Donor-Recruitment	Report of all donors who have indicated their willingness to be called on an emergency basis, including their name, ABO/Rh, home phone, work phone, last donation date and donation/deferral code from the last donation date. **NOTE:** Users can specify ABO/Rh and date range for donations to be included on report.
D86	Donor-Recruitment	Report of all donors who have indicated their willingness to be called on a regular basis for specified months and/or holidays, including their name, ABO/Rh, home phone, work phone, last donation date, and donation/deferral code from the last donation date.
D87	Donor-Recruitment	Report of all donors who have indicated their willingness to be called to be apheresis donors or for which no data was entered regarded their apheresis interest, sorted by ABO/Rh, including their name, ABO/Rh, home phone, work phone, last donation date and donation/deferral code from the last donation date.
D88	Donor-Recruitment	Calculation of cumulative donation totals based on user specific formula and previously entered donation data and provides reports to be used for donor awards.
D89	Donor-Recruitment	Mechanism to enter the fact that a donor was given a gallon donor award and provides a report listing all donors who have received gallon donor awards.
D90	Donor-Recruitment	Report of all first time donors for a specified period based on the entry in the date registered/edited field, including collection site, donation group, donor name, work phone, donation/deferral date, donation/deferral type and the deferral reason.
D91	Donor-Recruitment	Report of patient credits in order to provide feedback as the effectiveness of any recruitment efforts directed at the friends/relatives of patients, including the patient name, the donor name, and the donation/deferral date.
D92	Donor-Management	Report of short draw collections, (i.e., those whose collection volume is less than 405 ml, for a specified date range for supervisory review, sorted by donation date, including unit ID, collection volume, donor reaction code, phlebotomist, donation/deferral date, and collection site).
D93	Donor-Management	Report on donor temporary deferrals for a designated period, sorted by collection site and donation date. This can be used for supervisory review in order to identify trends or problems with donor deferrals, including the collection site, the deferral date, the donation group, the donor name, and the deferral reason.

IU#	Functionality	Description of Intended Use
D94	Donor-Management	Report of units that are quarantined/discarded prior to component preparation for supervisory review. This includes specified data fields, (i.e., donation date, unit ID, collection site, collection time started and completed, collection volume, donor reaction code, phlebotomist, collection disposition, and collection disposition comment).
D95	Donor-Management	Report of the collection and component preparation information, sorted by donation date, for supervisory review, including specified data fields, i.e., unit ID, type of donation, type of bag, anticoagulant, duration of collection in minutes, processing time in minutes, collection disposition, processing tech, blood components prepared, volume of components in ml, and storage time.
D96	Donor-Management	Blood product rejection report for those units which are collected, have components prepared and have component dispositions of 'discard' or 'quarantine', sorted by donation/deferral date, including unit ID, collection time, collection volume, component preparation time, component preparation tech, component, date/time component stored, component net weight, component disposition and component disposition comment.
D97	Donor-Management	Report of abnormal test results for a specified range of donor unit ID numbers to be used for supervisory review, including donation date, unit ID, donor internal file number and test(s) for which results were abnormal, i.e., did not meet the criteria for subsequent release for transfusion, and excluding the donor names for confidentiality purposes.
D98	Donor -Statistics	Report of all donors who attempted to donate for a specified date range, sorted by donation group, including donor name, work phone, last attempt date, donation type, and cumulative donations.
D99	Donor -Statistics	Report of scheduling information for specified date range for use in evaluating staffing needs, including donation/deferral date, arrival/appointment time, unit ID, donation/deferral code, donation type, and patient credit.
D100	Donor -Statistics	Capture of workload information and transfer of data to non-BB laboratory files for use in a variety of local and national reports, including the CAP Laboratory Management Index Program and DSS.

B. Inventory Functions

1. BLOOD INVENTORY file (#65) Description of Data Elements

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
.01	UNIT ID	FREE TEXT (PM=Any alphanumeric, upper or lower case, punctuation allowed)
	ANSWER MUST BE 2-12 CHARACTERS IN LENGTH The unit identification on the blood product label.	
.02	SOURCE	FREE TEXT (PM - see note)
	Entry must be one of the following: Collecting facility NOTE: Although this is stored as free text, the input choices are restricted to entries in the SUPPLIER field for the specific component in the BLOOD PRODUCT file (#66).	
.03	INVOICE#	FREE TEXT
	ANSWER MUST BE 2-10 CHARACTERS IN LENGTH Number on invoice accompanying unit.	
.04	COMPONENT	POINTER TO BLOOD PRODUCT
	Name of blood product file (#66)	
.05	DATE/TIME RECEIVED	DATE/TIME (PM=Exact date(with month and day) and time required and echo the answer; allows dates up to the current time)
	Date/time component received. Allows current and past times but disallows future times.	
.06	EXPIRATION DATE/TIME	DATE/TIME (PM=Exact date (with month and day) required, time allowed and echo the answer)
	Expiration date/time of unit.	
.07	ABO GROUP	SET 'A' FOR A; 'B' FOR B; 'O' FOR O; 'AB' FOR AB; 'NA' FOR N/A;
	ABO blood group of unit. If ABO group is not applicable to the unit or component (ex. a mixed pool of compatible ABO types) enter NA for N/A (not applicable).	
.08	RH TYPE	SET 'POS' FOR POSITIVE; 'NEG' FOR NEGATIVE; 'NA' FOR N/A;
	Rh type of unit. If RH TYPE not applicable to the unit or component enter NA for N/A (not applicable or necessary).	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
.09	LOG-IN PERSON	POINTER TO NEW PERSON file (#200)
	Person entering unit in file.	
.1	COST	NUMERIC(PM=1 or more numeric; may have decimal followed by 2 numerics)
	TYPE A NUMBER BETWEEN 0 AND 99999 Cost of unit	
.11	VOLUME (ml)	NUMERIC(PM=1 or more numerics)
	TYPE A WHOLE NUMBER BETWEEN 0 AND 9999 Volume of unit or component	
.12	TYPING CHARGE	NUMERIC(PM=1 or more numeric; may have decimal followed by 2 numerics)
	TYPE A NUMBER BETWEEN 0 AND 999 Charge assigned by organization performing antigen typing.	
.13	SHIPPING INVOICE#	FREE TEXT
	Enter RETURN invoice # to SUPPLIER (2-10 characters) Invoice (order) number identified with returned shipment to supplier.	
.14	RETURN CREDIT	FREE TEXT
	Entry must begin with a minus (-) then amount of credit (ex. -37.50) Credit given for returning unit to supplier or sending unit elsewhere	
.16	DIVISION	POINTER TO INSTITUTION FILE (#4)
	The division where the unit resides. If the unit is being transferred to another division, enter the New division.	
1.1	BAG LOT #	FREE TEXT
	Answer must be 1-15 characters in length. You may enter the bag lot number if preparing a component from a unit in inventory.	
.2	PATIENT XMATCHED/ASSIGNED (Subfile 65.01)	FREE TEXT
	Multiple	
	.01 PATIENT XMATCHED/ASSIGNED	FREE TEXT (PM-see note)
	On the right of NAME is the last characters of the patient's SSN. Enter patient name, SSN, or first letter of last name and last 4 digits of SSN.	
	NOTE: The data is stored as free text; however, the input template for the data entry routine allows only entries selected from the PATIENT file (#2).	
	.012 PARENT FILE	COMPUTED
	File where demographic data is stored for patient crossmatched.	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
.02	DATE/TIME UNIT ASSIGNED	DATE (PM=Exact date (with month and day) and time required and echo the answer; allows dates up to the current time)

Date/time unit is crossmatched for each patient. If unit is released from crossmatch for a specific patient the date/time is deleted.

.03	LAST SPECIMEN DATE XMATCHED	DATE/TIME (PM=Exact date (with month and day) required, time allowed and echo the answer)

Date/time of specimen unit was last xmatched with.

NOTE: Data not entered. Triggered by the DATE/TIME CROSSMATCHED field of the BLOOD SAMPLE DATE/TIME subfield of the PATIENT XMATCHED/ASSIGNED subfield of the BLOOD INVENTORY file.

1 BLOOD SAMPLE DATE/TIME (Subfile 65.02)DATE
Multiple

.01	BLOOD SAMPLE DATE/TIME	DATE (PM=Exact date (with month and day) required, time allowed/ and echo the answer; allows dates up to the current time)

Date/time of blood sample used for pretransfusion testing.

.02	TREATING SPECIALITY	FREE TEXT(PM=Any alphanumeric, upper or lower case, punctuation allowed - see note)

ANSWER MUST BE 3-30 CHARACTERS IN LENGTH
Not numeric or starting with punctuation
Medical specialty treating patient.

NOTE: During routine data entry, this data is pulled from the information associated with the entry for the REQUESTING PHYSICIAN during the specimen log-in process and is then stored as free text. It is unrelated to the entry for the individual component request.

.03	PHYSICIAN	FREE TEXT (PM -see note)

ANSWER MUST BE 3-30 CHARACTERS IN LENGTH
Patient's physician

NOTE: During routine data entry, this data is pulled from the information associated with the entry for the REQUESTING PHYSICIAN during the specimen log-in process and is then stored as free text. It is unrelated to the entry for the individual component request.

Field#	Field Name Help Prompt Description		Data Type (PM=Pattern Match)
	.04	XMATCH RESULT	SET 'C' FOR COMPATIBLE; 'I' FOR INCOMPATIBLE, UNSAFE TO TRANSFUSE; 'CD' FOR COMPATIBLE, DON'T TRANSFUSE; 'CF' FOR COMPATIBLE, FURTHER STUDY NEEDED; 'IG' FOR INCOMPATIBLE, GIVE WITH BB DIRECTOR APPROVAL
		Interpretation of major crossmatch.	
	.05	XMATCH TECH	POINTER TO NEW PERSON FILE (#200)
		Person performing crossmatch	
	.06	PATIENT SAMPLE ACC #	FREE TEXT
		ANSWER MUST BE 1-12 CHARACTERS IN LENGTH Blood bank accession number for patient sample.	
	.07	TREATING SPECIALTY NUMBER	POINTER TO FACILITY TREATING SPECIALTY FILE (#45.7)
		Internal entry # in treating specialty file.	
	.08	PROVIDER NUMBER	POINTER TO NEW PERSON FILE(#200)
		Internal entry # in the NEW PERSON file If the physician is an entry in the NEW PERSON file the printer number is stored here.	
	.09	DATE/TIME CROSSMATCHED	DATE (PM=Exact date (with month and day) and time required and echo the answer)
		The date/time of the blood sample crossmatch	
	.1	RELEASE REASON	FREE TEXT
		ANSWER MUST BE 2-40 CHARACTERS IN LENGTH NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS File (#62.5) which have BB RELEASE as the screen.	
	1	MAJOR XMATCH METHOD (Subfile 65.0911)	
		.01 MAJOR XMATCH METHOD	Field Not in Use
		.02 TECHNIQUE	Field Not in Use
		.03 INTERPRETATION	Field Not in Use
		.04 IS	Field Not in Use
		.05 37 C	Field Not in Use
		.06 AHG	Field Not in Use
		.07 CONTROL CELL	Field Not in Use
		.08 ROOM TEMP	Field Not in Use
		.09 12-18 C	Field Not in Use
		.1 4 C	Field Not in Use

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
	2 MINOR XMATCH METHOD (Subfile 65.0912)	Field Not in Use
	.01 MINOR XMATCH METHOD	Field Not in Use
	.02 TECHNIQUE	Field Not in Use
	.03 INTERPRETATION	Field Not in Use
	.04 IS	Field Not in Use
	.05 37 C	Field Not in Use
	.06 AHG	Field Not in Use
	.07 CONTROL CELL	Field Not in Use
	.08 ROOM TEMP	Field Not in Use
	.09 12-18 C	Field Not in Use
	.1 4 C	Field Not in Use
	3 CROSSMATCH COMMENT (Subfile 65.0913) Multiple These are comments relating to the crossmatch of the specific donor unit. NOTE: These comments become part of the permanent transfusion record of the patient if the unit is subsequently transfused to the patient.	
	.01 CROSSMATCH COMMENT ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	FREE TEXT
	NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB TESTING as the screen.	
3	DATE/TIME UNIT RELOCATION (Subfile 65.03) Multiple These are dates/times the unit is relocated from one location to another. EXAMPLE: From blood bank to surgery or from surgery to blood bank.	DATE/TIME
	.01 DATE/TIME UNIT RELOCATION Date/time the unit is relocated from one location to another, ex. from blood bank to surgery or from surgery to blood bank. This is a multiple entry field but only asked once	DATE (PM=Exact date (with month and day) required, time allowed/ and echo the answer; allows dates up to the current time)
	.02 INSPECTION Interpretation of unit inspection for color and appearance immediately before issue/relocation.	SET 'S' FOR SATISFACTORY; 'U' FOR UNSATISFACTORY;
	.03 TECH INSPECTING Person inspecting unit	POINTER TO NEW PERSON FILE(#200)

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
.04	LOCATION	FREE TEXT(PM=Any alphanumeric, upper or lower case, punctuation allowed)
	Entry must be 2-30 characters Location to which unit of blood is being relocated.	
.05	ISSUED TO/REC'D FROM	FREE TEXT
	ANSWER MUST BE 2-30 CHARACTERS IN LENGTH Person taking unit from or returning unit to the blood bank.	
.06	FOR PATIENT	FREE TEXT
	ANSWER MUST BE 2-30 CHARACTERS IN LENGTH The patient the unit of blood is being relocated for.	
.07	VA PATIENT NUMBER	POINTER TO PATIENT FILE (#2)
	Internal entry # in the patient (#2) file If the patient is an entry in the PATIENT file (#2) the pointer number	
4.1	DISPOSITION	SET 'R' FOR RETURN TO SUPPLIER; 'T' FOR TRANSFUSE; 'D' FOR DISCARD; 'S' FOR SEND ELSEWHERE; 'M' FOR MICROBIOLOGY/ RESEARCH; 'MO' FOR MODIFY; 'SA' FOR SALVAGED
	Final disposition of the unit	
4.2	DISPOSITION DATE	DATE/TIME (PM=Exact date (with month and day) required, time allowed/ and echo the answer; allows dates up to the current time)
	Enter only past or present Date/time Date of final disposition	
4.3	DISPOSITION ENTERING PERSON	POINTER TO NEW PERSON FILE(#200)
	Person entering final disposition	
4.4	POOLED/DIVIDED UNITS	FREE TEXT (PM=1 or more numeric)
	Enter number of units in pool enclosed in parentheses; ex. (5). Number of units in pool OR number of aliquots into which a unit of blood/blood component has been divided	
4.5	SHIP TO	FREE TEXT
	MUST BE 2-68 CHARACTERS IN LENGTH, CAN USE LAB DESCRIPTION FILE ENTRIES WITH BB DISP SCREEN. If unit is returned to sender or shipped elsewhere enter name/location of facility where sent. NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB DISP as the screen.	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
5	DISPOSITION COMMENT (Subfile 65.06) Multiple These are final disposition comments.	
	.01 DISPOSITION COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH, CAN USE LAB DESCRIPTION FILE ENTRIES WITH BB DISP SCREEN Final disposition comments. NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB DISP as the screen.	FREE TEXT
6.1	PATIENT TRANSFUSED Enter patient name Name of patient transfused NOTE: The data is stored as free text; however, the input template for the data entry routine allows only entries selected from the PATIENT file (#2).	FREE TEXT (see note)
6.12	PARENT FILE This is the file whose demographic data is stored for the patient transfused.	COMPUTED
6.15	TRANSFUSED PATIENT ABO This is the transfused patient's ABO.	COMPUTED
6.16	TRANSFUSED PATIENT RH This is the transfused patient's Rh type.	COMPUTED
6.2	PHYSICIAN ANSWER MUST BE 2-30 CHARACTERS IN LENGTH Physician of patient transfused NOTE: The data is stored as free text; however, the data is generally pulled from the current entry in the PATIENT File (#2), field .104 and is displayed as the default. If no data exists, the user is required to enter data.	FREE TEXT
6.3	TREATING SPECIALTY ANSWER MUST BE 3-30 CHARACTERS IN LENGTH Treating specialty to which the patient is assigned at the time the unit was transfused. NOTE: The data is stored as free text; however, the data is generally pulled from the current entry in the PATIENT file (#2), field .(#1043) and is displayed as the default. If no data exists the user is required to enter data.	FREE TEXT(PM=Any alphanumeric, upper or lower case, punctuation allowed; may not be all numeric or start with punctuation)

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
6.4	TRANSFUSION RECORD NUMBER TYPE A NUMBER BETWEEN 1 AND 9999999 Internal number in subfile 63.085 TRANSFUSION RECORD NOTE: This field is not editable. It is created by software.	NUMERIC(PM=contains 6 or more numerics)
6.5	TRANSFUSION REACTION If patient had a transfusion reaction enter 'Y' Answer 'YES' if the patient experienced an adverse reaction as a result of transfusion of designated blood/blood component	SET '1' FOR YES; '0' FOR NO;
6.6	PROVIDER NUMBER If the physician is an entry in the New Person file the pointer number is stored here.	POINTER TO NEW PERSON FILE (#200)
6.7	TREATING SPECIALTY NUMBER Internal entry # in treating specialty file If the treating specialty is an entry in the treating specialty file, the pointer number is stored here.	POINTER TO FACILITY TREATING SPECIALTY FILE (#45.7)
6.8	TRANSFUSION REACTION TYPE Indicates the type of transfusion reaction Selects transfusion reaction type NOTE: Choices are limited to those with the SCREEN = TRANSFUSION REACTION	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
7	TRANSFUSION COMMENT (Subfile 65.07) Multiple These are comments regarding the transfusion or specific unit, including whether only a part of the unit was transfused and the reason(s).	
	.01 TRANSFUSION COMMENT Comments regarding the transfusion of the specific unit, including whether only a part of the unit was transfused and the reason(s). ANSWER MUST BE 1-80 CHARACTERS IN LENGTH	FREE TEXT
	NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB TRANS as the screen.	
8	RESTRICTED FOR The patient indicated here is the only one who may be transfused with this unit. NOTE: The data is stored as free text; however, the input template for the data entry routine allows only entries selected from the PATIENT file (#2).	FREE TEXT

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
8.1	POS/INCOMPLETE SCREENING TESTS	SET '1' FOR YES; '0' FOR NO;
	If autologous donor has a positive syphilis serology, HBsAg, or HIV antibody test YES is entered. This flag is intended to warn NOT to transfuse this unit to anyone other than the DONOR!	
8.3	DONATION TYPE	SET 'A' FOR AUTOLOGOUS; 'D' FOR DIRECTED;
	This field indicates which type of donation will be used to log this unit.	
9	MODIFIED TO/FROM (Subfile 65.091) Multiple	POINTER TO BLOOD PRODUCT FILE (#66)
	TYPE A NUMBER BETWEEN 0 AND 99999 If unit is modified identifies what products are made and what are the new unit ID's. If unit is a pool identifies what product was pooled and what units are in the pool. .001 NUMBER	NUMBER(PM=1 or more numerics)
	TYPE A WHOLE NUMBER BETWEEN 1 AND 20. A number from 1 to 20.	
	.01 MODIFIED TO/FROM	POINTER TO BLOOD PRODUCT FILE (#66)
	If unit is modified, identifies what products are made and what are the new units by ID#. If unit is a pool, identifies what product was pooled and what units are in the pool. Products allowed to be made from inventory. NOTE: Selections are limited based on the file setup in the BLOOD PRODUCT file (#66) in the MODIFIED TO/FROM field. For the specific component being modified.	
	.02 UNIT ID	FREE TEXT
	ANSWER MUST BE 2-12 CHARACTERS IN LENGTH If the unit is to be modified, the unit ID of the new unit is entered here. If the unit is a modified unit, the old unit ID's are entered.	
	.03 FROM/TO	SET '1' FOR FROM; '2' FOR TO;
	If entry is from another unit, '1' is entered. If entry is to become or be part of another unit, a '2' is entered. Several of the entries may have been entered to form a pool and each entry will have a '1' entered. Then the pool may be modified to another unit and then the entry will have a '2' entered. NOTE: This data is routinely entered automatically by the software.	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
10	ABO INTERPRETATION	SET 'A' FOR A; 'B' FOR B; 'O' FOR O; 'AB' FOR AB; 'ND' FOR NOT DONE;
	Interpretation of ABO testing	
10.2	TECH ENTERING-ABO INTERP	POINTER TO NEW PERSON FILE(#200)
	Person performing ABO testing	
10.3	ABO TESTING COMMENT	FREE TEXT
	ANSWER MUST BE 1-80 CHARACTERS IN LENGTH Comment related to ABO testing	
	NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB TESTING as the screen.	
10.4	ABO MOVED FROM DONOR FILE	SET '1' FOR YES;
11	RH INTERPRETATION Interpretation of Rh testing	SET 'NEG' FOR NEGATIVE; 'POS' FOR POSITIVE; 'ND' FOR NOT DONE;
11.2	TECH ENTERING-RH INTERP	POINTER TO NEW PERSON FILE(#200)
	Person performing Rh testing	
11.3	RH TESTING COMMENT	FREE TEXT
	ANSWER MUST BE 1-80 CHARACTERS IN LENGTH Comment related to Rh testing	
	NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB TESTING as the screen.	
11.4	RH MOVED FROM DONOR FILE	SET 1' FOR YES;
15	DATE RE-ENTERED (Subfile 65.15) Multiple	
	Re-entry date of the unit in the file	
	NOTE: Data for this multiple is entered automatically by the software. It is not editable.	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
	.01 DATE RE-ENTERED	DATE/TIME (PM=Exact date (with month and day) required, time allowed and echo the answer)
	Re-entry date of the unit in the file elsewhere enter the date re-entering the unit in the INVENTORY file.	
	.02 PREVIOUS DISPOSITION The previous disposition	SET 'R' FOR RETURNED TO SUPPLIER; 'S' FOR SENT ELSEWHERE;
	.03 PREVIOUS DISPOSITION DATE	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
	The date of the previous disposition.	
	.04 PREVIOUS DISP ENTERING PERSON The name of the person entering the previous disposition	POINTER TO NEW PERSON FILE(#200)
	.05 PREVIOUS SHIPPING INVOICE ANSWER MUST BE 2-10 CHARACTERS IN LENGTH The previous shipping invoice.	FREE TEXT
	.06 PREVIOUS RECEIVING INVOICE ANSWER MUST BE 2-10 CHARACTERS IN LENGTH The previous receiving invoice.	FREE TEXT
	.07 PREVIOUS LOG-IN PERSON The name of the previous log-in person.	POINTER TO NEW PERSON FILE(#200)
	.08 PREVIOUS DATE LOGGED-IN Date of the previous log-in.	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
	.09 PREVIOUS SHIP TO ANSWER MUST BE 2-68 CHARACTERS IN LENGTH The name of the previous ship.	FREE TEXT
16	PEDIATRIC ALIQUOT MADE (Subfile 65.16)	
	.01 PEDIATRIC ALIQUOT MADE	Field Not in Use
	.02 VOLUME (ml)	Field Not in Use

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
60	RBC ANTIGEN PRESENT (Subfile 65.04) Multiple	POINTER
	.01 RBC ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	RBC Antigen tested Enter ANTIGEN Antigen(s) present on red blood cells of the unit (if applicable)	
	NOTE: Choices are restricted to those for which the SCREEN = AN	
	.02 RBC ANTIGEN PRESENT COMMENT	Field Not in Use
70	RBC ANTIGEN ABSENT (Subfile 65.05) Multiple	
	.01 RBC ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	Antigen(s) absent on red blood cells of the unit (if applicable)	
	NOTE: Choices are restricted to those for which the SCREEN = AN	
	.02 RBC ANTIGEN ABSENT COMMENT	Field Not in Use
80	HLA ANTIGEN PRESENT (Subfile 65.08) Multiple SELECTS HLA ANTIGEN	POINTER
	.01 HLA ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	HLA antigen(s) present on the appropriate cells Selects HLA antigens	
	NOTE: Choices are restricted to those for which the SCREEN = HL	
	.02 HLA ANTIGEN PRESENT COMMENT	Field Not in Use
90	HLA ANTIGEN ABSENT (Subfile 65.09) Multiple	POINTER
	.01 HLA ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	HLA antigen(s) absent on the appropriate cells	
	NOTE: Choices are restricted to those for which the SCREEN = HL	
	.02 HLA ANTIGEN ABSENT COMMENT	Field Not in Use

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
91	CMV ANTIBODY	SET '0' FOR NEG; '1' FOR POS;
121	DONOR CELLS+ANTI D(slide rgt)	Field Not in Use
122	DONOR CELLS+RH CTRL(slide rgt)	Field Not in Use
123	DONOR CELLS+ANTI D (37)	Field Not in Use
124	DONOR CELLS+RH CTRL (37)	Field Not in Use
125	DONOR CELLS+ANTI D (AHG)	Field Not in Use
126	DONOR CELLS+RH CTRL (AHG)	Field Not in Use
127	DONOR CELLS+ANTI D (AHG) CC	Field Not in Use
128	DONOR CELLS+RH CTRL CC	Field Not in Use
141	DONOR CELLS+ANTI A(slide)	Field Not in Use
142	DONOR CELLS+ANTI B(slide)	Field Not in Use
143	DONOR CELLS+ANTI A,B(slide)	Field Not in Use
144	DONOR PLASMA+A1 CELLS	Field Not in Use
145	DONOR PLASMA+B CELLS	Field Not in Use
200	DIRECT AHG(BS)	Field Not in Use
500	TEST/PROCEDURE (Subfile 65.3) Multiple This field contains the test performed on this unit.	POINTER
	.01 TEST/PROCEDURE	POINTER TO LABORATORY TEST FILE (#60)
	This field contains the test performed on this unit. Used to keep track of TEST/PROCEDURES for WKLD workload. Selects only blood bank subscripted tests.	
	1 COMPLETE DATE/TIME (Subfile 65.31) Multiple The completion date/time of the test/procedure.	DATE
	.01 COMPLETE DATE/TIME	DATE(PM=Exact date WKLD workload flag (with month and day) and time required and echo the answer; allows dates up to the current time)
	.02 TECH The name of the technician completing the test/procedure.	POINTER TO NEW PERSON FILE(#200)
	.03 INSTITUTION The name of the institution from the Institution file.	POINTER TO INSTITUTION FILE (#4)
	.04 MAJOR SECTION The name of the major section from the Accession file.	POINTER TO ACCESSION FILE (#68)
	.05 SUBSECTION The name of the subsection from the Accession file	POINTER TO ACCESSION FILE (#68)

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
	1 WKLD CODE (Subfile 65.311) Multiple The name of the workload code from the WKLD code file	POINTER
	.01 WKLD CODE	POINTER TO WKLD CODE FILE (#64)
	.02 WKLD CODE COUNT Type a Number between 0 and 999, 0 Decimal Digits. The count of the workload code entry.	NUMBER
	.03 WKLD CODE COUNTED A set of code of yes or no, whether the workload was counted.	SET '1' FOR YES; '0' FOR NO;
999	DATA CHANGE DATE (Subfile 65.099) Multiple Date the report value was changed	DATE
	.01 DATA CHANGE DATE This field contains the date the reported value was changed	DATE/TIME (PM=Exact date (with month and day) required, time allowed and echo the answer)
	.02 PERSON CHANGING DATA ANSWER MUST BE 2-30 CHARACTERS IN LENGTH This field contains the person that alter the reported value	FREE TEXT
	.03 DATA ELEMENT ANSWER MUST BE 1-30 CHARACTERS IN LENGTH This field indicated what result name the data was altered.	FREE TEXT
.04	OLD VALUE ANSWER MUST BE 1-30 CHARACTERS IN LENGTH This field contains the value before it was altered.	FREE TEXT
.05	NEW VALUE ANSWER MUST BE 1-30 CHARACTERS IN LENGTH This field contains the value after it was altered.	FREE TEXT

2. BLOOD INVENTORY file (#65) Data Copied from Original Unit

The BLOOD INVEVTORY file (#65) data are copied from Original Unit and entered in the BLOOD INVENTORY file (#65) for New Unit upon Unit Modification.

File 65 Field#	Field Name	Data Copied/Entered
.02	SOURCE	Assigns Self
.03	INVOICE #	Assigns 00
.07	ABO GROUP	Exact
.08	RH TYPE	Exact
.1	COST	Exact
.16	DIVISION	Exact
2	PATIENT XMATCHED/ASSIGNED (Subfile 65.01)	NA
.01	PATIENT XMATCHED/ASSIGNED	*Exact if unit is assigned
.012	PARENT FILE	NA- Computed field
.02	DATE/TIME UNIT ASSIGNED	*Exact if unit is assigned
.03	LAST SPECIMEN DATE XMATCHED	*Exact if unit is assigned
1	BLOOD SAMPLE DATE/TIME (Subfile 65.02)	NA
.01	BLOOD SAMPLE DATE/TIME	*Exact if unit is assigned
.02	TREATING SPECIALITY	*Exact if unit is assigned
.03	PHYSICIAN*	Exact if unit is assigned
.04	XMATCH RESULT*	Exact if unit is assigned
.05	XMATCH TECH	*Exact if unit is assigned
.06	PATIENT SAMPLE ACC #	*Exact if unit is assigned
.07	TREATING SPECIALTY NUMBER	*Exact if unit is assigned
.08	PROVIDER NUMBER	*Exact if unit is assigned
.09	DATE/TIME CROSSMATCHED	*Exact if unit is assigned

File 65 Field#	Field Name	Data Copied/Entered
3	CROSSMATCH COMMENT (Subfile 65.0913)	NA
	.01 CROSSMATCH COMMENT	*Exact if unit is assigned
8	RESTRICTED FOR	Exact
8.1	POS/INCOMPLETE SCREENING TESTS	Exact
8.3	DONATION TYPE	Exact
60	RBC ANTIGEN PRESENT (Subfile 65.04)	NA
	.01 RBC ANTIGEN PRESENT	Exact
70	RBC ANTIGEN ABSENT (Subfile 65.05)	NA
	.01 RBC ANTIGEN ABSENT	Exact
80	HLA ANTIGEN PRESENT (Subfile 65.08)	NA
	.01 HLA ANTIGEN PRESENT	Exact
90	HLA ANTIGEN ABSENT (Subfile 65.09)	NA
	.01 HLA ANTIGEN ABSENT	Exact
91	CMV ANTIBODY	Exact

***Exact if unit is "assigned" at the time the unit is modified and data exists for the original unit.**

Software Limitations

Functionality	Description of Software Limitations
Inventory- Receipt, Shipment and Discard of Units	No automatic quarantining of in-date units based on donor look back procedures. No provision for documenting approval of autologous products repeatedly reactive for HIV-1 Antigen. No provision for tracking specific method of disposal of discarded units. No provision for documenting receipt and storage of human tissue (other than blood and blood components) and derivatives.
Inventory- Confirmation testing of units	No provision for test result interpretation based on actual testing results, (e.g. evaluation of reactions of antisera). Manual entry of ABO/Rh confirmation testing interpretations (rechecks).
Inventory- Modification of units	No system of blood component quality control records. No provision for evaluation of ABO compatibility of units being modified into a pooled product. No system for recording of lot #s of filters used in the preparation of leukocyte reduced blood products and/or solutions used in the preparation of washed, frozen, deglycerolized and rejuvenated red blood cells. Partial system for evaluating mutually exclusive components.
Inventory - Issue/relocation of units for transfusion	Manual entry of test result interpretations for all required testing. Manual entry of ABO/Rh confirmation testing. No provision for generating the electronic equivalent of the Blood Component Requisition (SF518). Manual entry of pretransfusion compatibility testing interpretations. No provision of a separate methodology for emergency release of units. No provision for evaluation of time elapsed criteria for return/reissue of units. No electronic record created for relocation from the Blood Bank which is not completed because unit inspection is found to be unsatisfactory. No provision for documenting medical director approval for transfusion of units after the expiration date/time. No provision for documenting storage and issue of human tissue.

Functionality	Description of Software Limitations
Inventory - Phenotyping of units	Manual entry of test result interpretations.
Inventory- Release of units to stock/available inventory	No provision of an electronic donation record for those autologous units drawn on-site. No automatic provision for the release of units to stock after a specific time.
Inventory - Records	No system of blood component quality control records. No provision of system of records for actual test results, i.e. manual entry of test results interpretations for all required testing. No provision of indication for emergency issue of uncrossmatched blood. No provision for documenting approval for issue of components which are not ABO/Rh compatible. No provision for documenting approval for issue of components which have expired.

Intended Uses

IU#	Functionality	Description of Intended Uses
I1	Inventory - General	Provision of a unique cumulative unit history record for each individual blood component based on the data elements detailed above for the BLOOD INVENTORY file (#65).
I2		Maintenance of patient record confidentiality for test results/transfusion histories by providing different levels of security access such that the type of data access can be defined by individual user.
I3	Inventory - General	Site specific control to set up the entries in the BLOOD PRODUCT file (#66) for component specific requirements and algorithms to reflect the facility operating procedures. See Section IX for a listing of the data elements and the descriptions of their use.
I4	Inventory - General	Record updates immediately upon data entry.
I5	Inventory - General	Limited simultaneous access by multiple terminals/ users to the same unit record for purposes of data entry in specified options.
I6	Inventory - General	Accommodation of the use of a bar code reader for entry of the unit ID
I7	Inventory - General	Accommodation of the use of a bar code reader for entry of the component (blood product code)
I8	Inventory - General	Accommodation of the use of a bar code reader for entry of the expiration date
I9	Inventory - General	Limited access to only units assigned to the same division as the user, based on a comparison of the division assigned to the unit and the division currently assigned to the user.
I10	Inventory - General	Tracking of the person entering test results and/or performing various steps in the process, (i.e., the person entering the computer).
I11	Inventory - General	Tracking of changes in verified data for specific data elements defined for the BLOOD INVENTORY file (#65)- see Section IX for listing by data element
I12	Inventory - General	Tracking of verified data entered for specific data elements defined for the BLOOD INVENTORY file (#65) and LAB DATA file (#63) when data is entered/edited via the supervisory edit options requiring a higher level of security.
I13	Inventory-Receipt, Shipment and Discard of Units	Entry of an exact date and time for the date/time received.
I14	Inventory-Receipt, Shipment and Discard of Units	Check of the existing entries in BLOOD INVENTORY file (#65) during the entry of a unit ID to prevent entry of a duplicate unit ID of the same component.

IU#	Functionality	Description of Intended Uses
I15	Inventory-Receipt, Shipment and Discard of Units	Ability to designate the appropriate DONATION TYPE of the unit for autologous and directed donor units being entered. Component selected has an "A" or "D" in the AUTOLOGOUS/DIRECTED field (#.25) in the BLOOD PRODUCT file (#66).
I16	Inventory-Receipt, Shipment and Discard of Units	For autologous and directed donor units being entered, required entry of a patient name in the RESTRICTED FOR field (#8) of the BLOOD PRODUCT file (#66). Component selected has an "A" or "D" in the AUTOLOGOUS/DIRECTED field (#.25) in the BLOOD PRODUCT file (#66).
I17	Inventory-Receipt, Shipment and Discard of Units	For autologous and directed donor units being entered, ability to enter data in the POS/INCOMP. SCREENING TESTS field (#8.1) if appropriate based on the results of the required TTD marker testing. (Component selected has an "A" or "D" in the AUTOLOGOUS/DIRECTED field (#.25) in the BLOOD PRODUCT file (#66)).
I18	Inventory-Receipt, Shipment and Discard of Units	Limited ability to re-enter units into inventory, i.e., only units which can be re-entered are those with dispositions of 'S' (sent elsewhere) or 'R' (returned to supplier).
I19	Inventory-Receipt, Shipment and Discard of Units	For units that are re-entered, transfer of the original log-in and disposition data to appropriately designated fields to allow tracking of the original data Subfile (#65.15).
I20	Inventory-Receipt, Shipment and Discard of Units	Ability to enter a time in the Expiration Date field (#.06).
I21	Inventory-Receipt, Shipment and Discard of Units	Identification of potentially biohazardous units based on a notation on the shipping invoice for units which were released from the donor module with incomplete results, i.e., unit has a "YES" in the POS/INCOMP. SCREENING TESTS field (#8.1), in an effort to ensure appropriate handling.
I22	Inventory - Receipt, Shipment and Discard of Units	Site specific control of the text that appears on the shipping invoice. (SHIPPING INVOICE entry in the LAB LETTER file (#65.9).
I23	Inventory-Receipt, Shipment and Discard of Units	Inclusion of information on the shipping invoice to allow recording of information on shipping temperatures based on the wording entered in for in the LAB LETTER file (#65.9) for SHIPPING INVOICE.
I24	Inventory-Receipt, Shipment and Discard of Units	Restricted selection of blood components to those in BLOOD PRODUCT file (#66)with suppliers, etc.
I25	Inventory-Receipt, Shipment and Discard of Units	Evaluation of the validity of the expiration date based on the entry in the MAXIMUM STORAGE DAYS field for that blood component in the BLOOD PRODUCT file (#66).

IU#	Functionality	Description of Intended Uses
I26	Inventory-Receipt, Shipment and Discard of Units	When editing data on a pooled product, restricted access to those units for which the component is defined as a pooled product based on the entry in the Pooled Product field (#.27) in the BLOOD PRODUCT file (#66) (i.e., requires a higher level of security access).
I27	Inventory-Receipt, Shipment and Discard of Units	Use of an average volume for the component for the unit volume, based on the entry in the Volume field (#.1) in the BLOOD PRODUCT file (#66) for that specific blood component.
I28	Inventory-Receipt, Shipment and Discard of Units	Use of the entry in the COST field (#.02) for the specific SUPPLIER for the specific component in the BLOOD PRODUCT file (#66) to record of the cost of the unit.
I29	Inventory-Receipt, Shipment and Discard of Units	Adjustment in the cost of units which are "RETURNED TO SUPPLIER" by entering data into the RETURN CREDIT field (#.14) for the unit.
I30	Inventory-Receipt, Shipment and Discard of Units	Transfer of a unit to a different DIVISION within a multidivisional facility, providing the numeric portion of the parent institution in the INSTITUTION file (#4) for the new DIVISION matches that of the existing entry in the DIVISION field (#.16).
I31	Inventory-Receipt, Shipment and Discard of Units	No entry of future disposition dates.
I32	Inventory - General	Site specific control of standardized canned comments which are accessible during the data entry of disposition information for units with a DISPOSITION 'TRANSFUSE' or 'MODIFY' (entries in the LABORATORY DESCRIPTIONS file (#62.5) for which the SCREEN = BB DISP).
I33	Inventory-Receipt, Shipment and Discard of Units	Ability to edit verified information relating to the receipt (log-in) for a specific unit ID. (Requires a higher level of security access)
I34	Inventory-Receipt, Shipment and Discard of Units	Ability to edit verified information relating to the disposition of a specific unit ID. (Requires a higher level of security access)
I35	Inventory-Receipt, Shipment and Discard of Units	Ability to edit verified information relating to the contents of a pooled product for a specific unit ID. (Requires a higher level of security access)
I36	Inventory - Confirmation testing of units	For units received from an outside facility or created through modification of other units, creation of a queue which includes units on the Inventory ABO/Rh testing worklist report if the blood component has a "yes" in the CONTAINS RED CELLS field (#.19) in the BLOOD PRODUCT file (#66).

IU#	Functionality	Description of Intended Uses
I37	Inventory - Confirmation testing of units	Comparison of the confirmatory (recheck) test results to the unit log-in information and display of a warning message if results do not agree.
I38	Inventory - Confirmation testing of units	Limited access to those units assigned to the same division as the user if data entry is done by unit (not if done by batch).
I39	Inventory - Confirmation testing of units	Testing worksheet which includes unit #s of units to be tested for use in manually recording actual test results.
I40	Inventory - Confirmation testing of units	Site specific control of the text which appears on the Inventory ABO/Rh testing worksheet generated by the option [LRBLIW]. (INVENTORY WORKSHEET entry in the LAB LETTER file (#65.9)).
I41	Inventory - Confirmation testing of units	Site specific control of standardized canned comments which are accessible during the data entry of confirmatory testing (rechecks) on units (entries in the LAB DESCRIPTIONS file (#62.5) for which the SCREEN = BB TESTING).
I42	Inventory - Modification of Units	Creation of a new entry in the INVENTORY file (#65) for each new blood component created and assignment of a final disposition to the original unit being modified.
I43	Inventory - Modification of Units	Attachment of appropriate pieces of data to the new unit created when a unit is modified - see Section V for a listing by data element
I44	Inventory - Modification of Units	Determination as to whether the ABO/Rh confirmatory testing information should be attached to the new unit created based on the entry in the RETYPE AFTER PREPARATION field for the component in the BLOOD PRODUCT file (#66).
I45	Inventory - Modification of Units	Placement of unit in queue for inclusion on the Inventory ABO/Rh testing worklist if the component created has a "YES" in the RETYPE AFTER PREPARATION field in the BLOOD PRODUCT file (#66).
I46	Inventory - Modification of Units	Assignment of the ABO of a pool based on the ABO of the first unit in the pool.
I47	Inventory - Modification of Units	Assignment of the Rh of a pool such that regardless of the order in which the units are pooled, the pool will be deemed Rh positive if any of the units in the pool were Rh positive.
I48	Inventory - Modification of Units	If a product is divided, calculation of the number of aliquots into which the unit is divided and entry of the data in the POOLED/DIVIDED UNITS field (#4.4) for the original unit.
I49	Inventory - Modification of Units	Exclusion of ability to modify an autologous component to a non autologous component if an entry exists in the POS/INCOMP. SCREENING TESTS field (#8.1) indicating that testing for transfusion transmitted disease markers is incomplete or positive.

IU#	Functionality	Description of Intended Uses
I50	Inventory - Modification of Units	Identification of units that are potentially unsuitable for modification based on an entry in the POS/INCOMP. SCREENING TESTS field (#8.1) indicating that the unit was released from the donor module with incomplete results.
I51	Inventory - Modification of Units	Restricted selection of component choices to those defined in the MODIFIED TO/FROM field (#.01) in the BLOOD PRODUCT file (#66) for the specific component of the unit being modified.
I52	Inventory - Modification of Units	Determination of whether more than one new unit can be created from a unit being modified based on the entry in the NOT ONLY ONE ALLOWED field (#.02) in the BLOOD PRODUCT file (#66) for the specific component of the unit being modified.
I53	Inventory - Modification of Units	Prevents multiple modifications to the same unit by excluding selection of units which already have a disposition entered.
I54	Inventory - Modification of Units	Requirement for a new unit ID for units being created.
I55	Inventory - Modification of Units	If a unit is being divided/split into other components, evaluation of the sum of the new unit volumes to make sure the sum does not exceed the volume of the original unit.
I56	Inventory - Modification of Units	Calculation of the expiration date of the unit being created based on the time of the data entry and the entry in the Days Left field (#.11) of the BLOOD PRODUCT file (#66). If the entry in the field is a whole number, the calculation will be a date only; whereas, if the entry is a decimal, the calculation will be in the format of a date and time.
I57	Inventory - Modification of Units	Evaluation of the calculated expiration date of the new unit against the expiration date of the unit being modified and displays alert message. If the calculated expiration date of the new unit exceeds the original expiration date, or in the case of a pooled product, the original expiration date of any of the units in the pool.
I58	Inventory - Modification of Units	No entry of future disposition dates.
I59	Inventory - Modification of Units	If a pediatric component is being created, restricted unit selection to those of appropriate age based on the entry in the MAX AGE FOR PEDIATRIC USE field (#.21) in the BLOOD PRODUCT file (#66).for the component of the unit being modified.
I60	Inventory - Modification of Units	If a pediatric component is being created, identification of low volume units, i.e., those with a volume < 150ml. and displays the volume.
I61	Inventory - Modification of Units	For pediatric units, calculation of the volume of the unit being created using an algorithm based on the weight entered and the specific gravity of the component as defined in the BLOOD PRODUCT file (#66).

IU#	Functionality	Description of Intended Uses
I62	Inventory - Modification of Units	If a pediatric unit is being created, assignment of a final disposition of 'MODIFIED' to units with 0ml remaining volume after the unit has been modified, (i.e., divided into aliquots).
I63	Inventory - Modification of Units	Site specific control to determine whether the user should be asked for a bag lot number during data entry of unit modification information for use in future FileMan search requests. (Ask Bag Lot # field (#.28) in the BLOOD PRODUCT file (#66)).
I64	Inventory - Issue/relocation of units for transfusion	Display of patient and unit information on the CRT for comparison with the label generated by the Unit Caution tag labels [LRBLILA] option after the necessary pretransfusion testing has been completed.
I65	Inventory - Issue/relocation of units for transfusion	Display of an alert message for any patients selected who have autologous and/or directed components in inventory, based on a match with the name entered in the Restricted For field (#8) for the unit(s).
I66	Inventory - Issue/relocation of units for transfusion	Display of a warning message if the unit selected has been double crossmatched and is still assigned to another patient at the time the unit is being issued for transfusion.
I67	Inventory - Issue/relocation of units for transfusion	Display of an alert message for any patients selected who have an entry in either the ANTIBODIES IDENTIFIED or the BLOOD BANK COMMENTS field (#.01) in the LAB DATA file (#63).
I68	Inventory - Issue/relocation of units for transfusion	Limited selection of units for issue to those units, which have a current status of 'assigned' and are assigned to the patient specified.
I69	Inventory - Issue/relocation of units for transfusion	For patients with an entry in the ANTIBODIES IDENTIFIED field (#.075), evaluation of the unit phenotyping of allogeneic (homologous) units against each clinically significant patient antibody & prevents issue if unit phenotyping s not appropriate, i.e., for each entry in the ANTIBODIES IDENTIFIED field (#.076), there must be a corresponding entry in the RBC ANTIGEN ABSENT field (#.5) of the unit.
I70	Inventory - Issue/relocation of units for transfusion	Prior to its issue for subsequent transfusion, evaluation of the crossmatch requirements in the BLOOD PRODUCT file (#66) for the specific component of the unit selected to determine whether crossmatch results must be entered and prevents issue if a crossmatch is required and no results have been entered for the unit.
I71	Inventory - Issue/relocation of units for transfusion	Use of an algorithm to prevent issue if no recheck results are entered based on component specific parameters defined the BLOOD PRODUCT file (#66), (i.e., if CONTAINS RED CELLS = YES, an ABO recheck is required, and if unit is Rh negative, the Rh recheck is also required).

IU#	Functionality	Description of Intended Uses
I72	Inventory - Issue/relocation of units for transfusion	Prevents issue of unit if the inspection is entered as unsatisfactory for that specific relocation from any previous relocations of that unit.
I73	Inventory - Issue/relocation of units for transfusion	Evaluation of the expiration date of unit and displays a warning message if unit is expired when compared to the current time.
I74	Inventory - Issue/relocation of units for transfusion	No issue of the unit if the component is one for which there is an entry of "YES" in the Modified Before Release field (#.14) in the BLOOD PRODUCT file (#66).
I75	Inventory - Issue/relocation of units for transfusion	Data validation check to ensure that the unit relocation date/time is not prior to the date/time the unit was assigned to the patient.
I76	Inventory - Issue/relocation of units for transfusion	Prevents entry of a future relocation date/time.
I77	Inventory - Issue/relocation of units for transfusion	Restricted relocation of units to standard locations within the same associated division based on the entries in the HOSPITAL LOCATION file (#44) *unless* user enters a non-standard location and overrides the check.
I78	Inventory - Issue/relocation of units for transfusion	Ability to edit verified information relating to the issue/relocation of a specific unit ID. (Requires a higher level of security access)
I79	Inventory - Phenotyping of units	Use of a standardized coding system, i.e., SNOMED, for identifying both RBC and HLA antigen typings on units.
I80	Inventory - Phenotyping of units	Ability for the site to define which entries in FUNCTION FIELD file (#61.3) are accessible during the data entry of unit RBC phenotyping results (entries in File #61.3 for which the SCREEN = AN).
I81	Inventory - Phenotyping of units	Site specific control of the transfusion criteria regarding the RBC antigen phenotyping of units selected for patient(s) with clinically significant antibody(ies). (CORRESPONDING ANTIGEN entry in the FUNCTION FIELD file (#61.3))
I82	Inventory - Phenotyping of units	Report listing of all units in inventory which have been phenotyped, including all entries for RBC antigens present and absent, for a specified component of a specified ABO/Rh.
I83	Inventory - Phenotyping of units	Data validation check to prevent entry of the same antigen in the RBC Antigen Present field (#.04) and the RBC Antigen Absent field (#.05) for a given unit ID.
I84	Inventory - Phenotyping of units	Donor record in the BLOOD DONOR file (#65.5) updated to reflect any unit phenotyping performed and entered for the donor unit after the unit has been released to the BLOOD INVENTORY file (#65).

IU#	Functionality	Description of Intended Uses
I85	Inventory-Release of units to stock/available inventory	Restricted release of the autologous/directed donor units for allogeneic (homologous) use, i.e., deletion of RESTRICTED FOR information, for units with a 'YES' in the POS/INCOMP. SCREENING TESTS field (#8.1).
I86	Inventory-Release of units to stock/available inventory	Restricted release of units from locations other than BLOOD BANK.
I87	Inventory - Release of units to stock/available inventory	Site specific control of standardized canned comments that are accessible during the release of crossmatched/assigned units back to available inventory. (entries in the LABORATORY DESCRIPTIONS file (#62.5) for which the SCREEN = BB RELEASE).
I88	Inventory- Records	Tracking of unit modification information for both the unit being modified and the unit(s) being created to include data on units MODIFIED TO or MODIFIED FROM as appropriate.
I89	Inventory- Records	Use of an algorithm to search the BLOOD INVENTORY file (#65) to look for missing data. See Section IX for a listing of data elements being evaluated.
I90	Inventory- Records	On-line storage of unit cumulative history for look-back purposes.
I91	Inventory- Records	Ability to display/print a hard copy of the cumulative unit history.
I92	Inventory- Records	Display of selected information on the current status of a unit, i.e., unit ID, component, expiration date, ABO/Rh, patient assigned if currently assigned, date assigned if currently assigned, current location and the date last relocated if unit has ever been relocated.
I93	Inventory- Records	Ability to print a hard copy of the cumulative unit history for units entered into the BLOOD INVENTORY file (#65) within a specified date range for which have a final disposition has been entered for use as a permanent record prior to the removal of the unit from the computer system.
I94	Inventory - Records	Requirement to use the Print units with final disposition [LRBLRUF] option to print a hard copy of the cumulative unit history in the BLOOD INVENTORY file (#65) in order to purge units for which a final disposition has been assigned. (**NOTE:** Higher level of security access also required.)
I95	Inventory - Management	Report of units which have been tested for CMV antibody and for which results have been entered, allowing user to specify ABO/Rh and whether the report should include CMV Antibody positive or CMV Antibody negative units.

IU#	Functionality	Description of Intended Uses
I96	Inventory- Management	Report for a specified range of disposition dates for a specified disposition of units (as long as the disposition selected "TRANSFUSE") and can be used for supervisory or utilization review. The report is sorted by component and includes specified data fields; for most dispositions i.e., unit ID, disposition date, supplier (source), ABO/Rh, date received and disposition comment. If "MODIFY" is selected for the disposition, the report will include the unit ID, disposition date, the component into which the unit was modified and the new unit ID instead.
I97	Inventory - Management	Report for a specified component (or all components), for a specified ABO/Rh (or all groups), of units which are available, i.e., are in date and have no final disposition, sorted by component, by ABO/Rh and by expiration date within the ABO/Rh which can be used for checking available inventory or for supervisory or utilization review. Report includes ABO/Rh, unit ID, expiration date, current location, patient assigned is currently assigned, specimen date is appropriate and totals for each ABO/Rh for each component. In addition, if the units autologous or directed, the patient's name is included even if the unit is not currently in the assigned status.
I98	Inventory- Management	Report for a specified component (or all components), for a specified ABO/Rh (or all groups), of units which have no final disposition (both in date and outdated), sorted by component, by ABO/Rh and by expiration date within the ABO/Rh which can be used for checking inventory and data entry records. Report includes ABO/Rh, unit ID, expiration date, current location, patient assigned is currently assigned, specimen date is appropriate and totals for each ABO/Rh for each component. In addition, if the unit is autologous or directed, the patient's name is included even if the unit is not currently in the assigned status.
I99	Inventory- Management	Report of units in the "assigned" status in chronological order by date/time assigned for use evaluating which units should be canceled/released or for other types of supervisory/utilization review. Report includes the date/time crossmatched (or assigned if component does not require crossmatching), specimen date/time if appropriate, unit ID, ABO/Rh, current location, unit expiration date/time, component abbreviation and patient (name and SSN).

IU#	Functionality	Description of Intended Uses
I100	Inventory- Management	Ability to edit supplier charges for individual units before generating costing reports by invoice number or by transaction.
I101	Inventory- Management	Ability to enter and/or edit supplier charges for special typing charges on individual units before generating costing reports for special typing charges.
I102	Inventory- Management	Report of units entered into the BLOOD INVENTORY file (#65) for a specified date range, sorted by supplier and by invoice # within the supplier for use in verifying billing invoices received. Report includes the component, invoice #, date/time received, unit ID, expiration date, ABO/Rh, cost, disposition if already entered, counts, cost subtotals and cost totals.
I103	Inventory- Management	Report of units entered into the BLOOD INVENTORY file (#65) for a specified date range, sorted by component, then by date received, then by ABO/Rh for use in verifying billing invoices received or for a review of transactions. Report includes the supplier, component, date/time received, invoice #, unit ID, ABO/Rh, expiration date, cost, disposition if already entered, counts, cost subtotals and cost totals. (**NOTE:** Report differs from the report by invoice number in both format and count as the report by transaction includes unit modifications done on-site.)
I104	Inventory- Management	Report of all special charges for units entered into the BLOOD INVENTORY file (#65) for a specified date range, sorted by date/time received, for use in verifying billing invoices received. Report includes the unit ID, component, supplier (source), invoice #, date/time received, cost, log-in tech, ABO/Rh, volume and special typing charge.
I105	Inventory- Management	Report detailing the disposition of autologous units entered into the BLOOD INVENTORY file (#65) for a specified date range, sorted by date received, which have a disposition = TRANSFUSE, for supervisory and/or utilization review. Report includes the patient information, unit ID, # days present in inventory (calculated from date received to disposition date), component treating specialty of the patient when transfused and totals by type of component.
I106	Inventory- Management	Report detailing the disposition of autologous units entered into the BLOOD INVENTORY file (#65) for a specified date range, sorted by patient, which have a disposition TRANSFUSE, for supervisory and/or utilization review. Report includes the patient information, component, disposition, unit ID, # days present in inventory (calculated from date received to disposition date) and totals by type of component.

IU#	Functionality	Description of Intended Uses
I107	Inventory- Management	Report of all issues/relocations for a specified date range, sorted by date/time relocation, for use as a semi-permanent record/utilization review or as a quick reference in other clinical lab sections. Report includes the date/time relocation, unit ID, component abbreviation, inspection results, tech performing inspection, person issued to, patient name, location issued to, patient SSN, counts by location and by component, and totals by component.
I108	Inventory- Statistics	Report of tallies for ABO recheck and Rh rechecks entered for units are entered into the BLOOD INVENTORY file (#65) for a specified date range.
I109	Inventory- Statistics	Capture of workload information feeds data to non-BB laboratory files which is subsequently used for a variety of local and national reports, including the CAP Laboratory Management Index Program and DSS.

C. Patient Functions

1. LAB DATA file (#63) Description of Data Elements

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
.01	LRDFN The internal file number of the patient (or other entity) Enter the application entry number.	NUMBER
.02	PARENT FILE The file where the name of this entry may be found. Enter the appropriate parent you wish this entry associated with.	POINTER TO FILE (#1)
.03	NAME The internal file number in the parent file for this entry.	NUMBER
.04	DO NOT TRANSFUSE	Field Not in Use
.05	ABO GROUP ABO blood group of patient	SET 'A' FOR A; 'B' FOR B; 'AB' FOR AB; 'O' FOR O;
.06	RH TYPE This is the patient's RH blood type.	SET 'POS' FOR POS; 'NEG' FOR NEG
.07	RBC ANTIGENS PRESENT(other) (Subfile 63.13) Multiple RBC antigens present other than ABO & Rho(D) NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identified.	POINTER
.01	RBC ANTIGENS PRESENT These are red blood cell antigens present other than ABO and Rho(D). NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier.	POINTER TO FUNCTION FIELD FILE (#61.3)
.02	RBC ANTIGENS PRESENT COMMENT This is a comment on the red blood cell antigen present. ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	FREE TEXT

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
.75	ANTIBODIES IDENTIFIED (Subfile 63.075) Multiple These are the patient's identified antibodies. Selects only antibodies. NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.	POINTER
	.01 ANTIBODIES IDENTIFIED This is a pointer to an antibody identified on this patient. NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.	POINTER TO FUNCTION FIELD FILE (#61.3)
	.02 ANTIBODIES IDENTIFIED COMMENT This is a comment on the antibodies identified. ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	FREE TEXT
.76	BLOOD BANK COMMENTS (Subfile 63.076)	
	.01 BLOOD BANK COMMENTS These are blood bank comments for this patient.	WORD-PROCESSING
.08	RBC ANTIGENS ABSENT(other) (Subfile 63.016) Multiple Red blood cell antigens absent other than ABO & Rho(D). NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier.	POINTER
	.01 RBC ANTIGENS ABSENT This is a red blood cell antigen absent for this patient. Selects only antigens. NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier	POINTER TO FUNCTION FIELD FILE (#61.3)
	.02 RBC ANTIGENS ABSENT COMMENT This is the comment on the absent antigen. ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	FREE TEXT
.84	BLOOD COMPONENT REQUEST (Subfile 63.084) Multiple These are blood component requests. Selects only components that can be requested.	POINTER
	.01 BLOOD COMPONENT REQUEST This is the component requested. Selects only components that can be selected within the division.	POINTER TO BLOOD PRODUCT FILE (#66)

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
.02	PRE-OP REQUEST	SET '1' FOR YES; '0' FOR NO;
	YES indicates this is a pre-operative request.	
.03	REQUEST DATE/TIME	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
	This is the date/time of the request.	
.04	NUMBER OF UNITS	NUMBER
	This is the number of units requested. Type a Number between 1 and 50, 0 Decimal Digits.	
.05	DATE/TIME UNITS WANTED	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
	This is the date/time the units are wanted.	
.06	PREVIOUS TRANSFUSIONS	Field Not in Use
.07	PREVIOUS TRANSFUSION REACTION	Field Not in Use
.08	ENTERING PERSON	POINTER TO NEW PERSON FILE (#200)
	This is the person entering the request.	
.09	REQUESTING PERSON	FREE TEXT
	This is the person making the request. ANSWER MUST BE 2-17 CHARACTERS IN LENGTH	
1	UNITS SELECTED FOR XMATCH (Subfile 63.0841)	POINTER Multiple
	These are units selected for crossmatch. SELECTS UNTS WITHOUT DISPOSITION	
	.01 UNIT SELECTED FOR XMATCH	POINTER TO BLOOD INVENTORY FILE (#65)
	This is the unit selected for crossmatch.	
	.02 INVERSE SPECIMEN DATE	NUMBER
	This is 9999999-collection date of the specimen for crossmatch. TYPE A NUMBER BETWEEN 1 AND 9999999.	
2.1	COMPONENT REQUEST REASON	FREE TEXT
	If request does not meet acceptable criteria enter the reason why the request should still be completed. ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	
	NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB AUDIT as the screen.	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
2.2	APPROVED BY This is the person approving the crossmatch request. ANSWER MUST BE 2-30 CHARACTERS IN LENGTH	FREE TEXT
2.3	TREATING SPECIALITY This is the treating specialty of the crossmatch request.	POINTER TO FACILITY TREATING SPECIALTY FILE (#45.7)
.85	TRANSFUSION RECORD (Subfile 63.017) Multiple This is data concerning the patient's transfusion.	DATE
.01	TRANSFUSION DATE/TIME This is a reverse chronological order of blood components transfused.	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer; allows dates up to the current time)
.02	COMPONENT This is the component transfused. Selects only blood components that can be transfused. NOTE: User can only elect from entries in the BLOOD PRODUCT file (#66) which have BB as the identifier.	POINTER TO BLOOD PRODUCT FILE (#66)
.03	COMPONENT ID This is the component identification number. ANSWER MUST BE 2-12 CHARACTERS IN LENGTH	FREE TEXT
.04	ENTERING PERSON This is the person entering information on the transfusion.	POINTER TO NEW PERSON FILE (#200)
.05	ABO ABO group of component	SET 'A' FOR A; 'B' FOR B; 'AB' FOR AB; 'O' FOR O;
.06	RH Rh type of component	SET 'POS' FOR POSITIVE; 'NEG' FOR NEGATIVE;
.07	UNITS POOLED This is the number of units pooled. TYPE A WHOLE NUMBER BETWEEN 0 AND 99.	NUMBER

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
.08	TRANSFUSION REACTION	SET '1' FOR YES; '0' FOR NO;
	YES indicates a transfusion reaction was associated with this transfusion.	
.09	DATA ENTERED VIA OLD RECORDS	SET '1' FOR YES;
	If transfusion data entered in the transfusion record via previous records option then a 'YES' will be entered here. NOTE: Data are not entered by the user.	
.1	VOL(ml) TRANSFUSED	NUMBER
	Enter in milliliters the volume of the unit transfused. Type a Number between 1 and 1000, 0 Decimal Digits.	
.11	TRANSFUSION REACTION TYPE	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
	Indicates type of transfusion reaction NOTE: User can select from entries in the BLOOD BANK UTILITY file (#65.4) which have TRANSFUSION REACTION as the screen.	
1	TRANSFUSION COMMENT (Subfile 63.186) Multiple	
	.01 TRANSFUSION COMMENT	FREE TEXT
	These are comments on the transfusion. ANSWER MUST BE 1-80 CHARACTERS IN LENGTH NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB TRANS as the screen.	
2	CROSSMATCH COMMENT (Subfile 63.027) Multiple	
	.01 CROSSMATCH COMMENT FREE TEXT These are comments on the crossmatch. ANSWER MUST BE 1-80 CHARACTERS IN LENGTH	
.86	TRANSFUSION REACTION DATE (Subfile 63.0171) Multiple Transfusion reactions that cannot be assigned to a specific unit are entered here.	DATE
.01	TRANSFUSION REACTION DATE	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
	Transfusion reactions that cannot be assigned to a specific unit are entered here.	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
	.02 TRANSFUSION REACTION TYPE	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
	Stores the type of transfusion reaction Selects only transfusion reaction entries NOTE: User can select from entries in the BLOOD BANK UTILITY FILE (#65.4) which have TRANSFUSION REACTION as the screen.	
	.03 PERSON ENTERING REACTION	POINTER TO NEW PERSON FILE (#200)
	Person entering reaction information	
	1 TRANSFUSION REACTION COMMENT (Subfile 63.172) Multiple Multiple for transfusion reaction comment	
	.01 TRANSFUSION REACTION COMMENT FREE TEXT Answer must be 2-68 characters in length.	
.09	HOSPITAL ID	COMPUTED
	Computed field to present the hospital ID from the parent file.	
.91	PAT. INFO. ANSWER MUST BE 1-20 CHARACTERS IN LENGTH Patient information	FREE TEXT
.92	LOCATION TYPE	SET 'C' FOR CLINIC; 'M' FOR MODULE; 'W' FOR WARD; 'Z' FOR OTHER LOCATION; 'N' FOR NON-CLINIC STOP; 'F' FOR FILE AREA; 'I' FOR IMAGING; 'OR' FOR OPERATING ROOM;
	This field is used for Workload Classification. Other location type is the default answer.	
.1	REPORT ROUTING (LOCATION) ANSWER MUST BE 1-19 CHARACTERS IN LENGTH The most current location where a lab procedure was requested.	FREE TEXT
.101	REPORT ROUTING (PROVIDER)	POINTER TO NEW PERSON FILE (#200)
	The most current requesting person who requested a lab procedure.	
.11	CUMULATIVE REPORT PAGES (Subfile 63.03) POINTER Multiple Current temporary (active) page numbers for the cumulative report.	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
	.01 CUMULATIVE REPORT PAGES	POINTER TO LAB REPORTS FILE (#64.5)
	First piece page number for the cumulative report.	
	1 PAGE	NUMBER
	TYPE A WHOLE NUMBER BETWEEN 1 AND 9999	
	Second piece page number for the cumulative report.	
.2	HLA ANTIGENS PRESENT (Subfile 63.14)	POINTER
	Multiple	
	These are HLA antigens associated with this patient.	
	SELECTS ONLY HLA ANTIGENS	
	NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have HL as the identifier	
	.01 HLA ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have HL as the identifier.	
	.02 HLA ANTIGEN PRESENT COMMENT	FREE TEXT
	ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	
.21	HLA ANTIGENS ABSENT (Subfile 63.141)	POINTER
	Multiple	
	These are HLA antigens NOT associated with this patient.	
	Selects HLA antigens.	
	NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have HL as the identifier.	
	.01 HLA ANTIGENS ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)
	This is the HLA antigen NOT associated with this patient.	
	NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have HL as the identifier.	
	.02 LA ANTIGEN ABSENT COMMENT	FREE TEXT
	ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
1	BLOOD BANK (Subfile 63.01) Multiple This is blood bank data on this patient.	DATE
	.01 DATE/TIME SPECIMEN TAKEN This is the date/time the specimen was collected. ENTER PAST OR PRESENT DATE/TIME ONLY	DATE (PM=Exact date (with month and day) required, time allowed (including seconds) and echo the answer; allows dates up to the current time)
	.03 DATE REPORT COMPLETED This is the date the report was completed.	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
	.04 ENTERING PERSON	Field Not in Use
	.05 SPECIMEN This is the specimen collected.	POINTER TO TOPOGRAPHY FIELD FILE (#61)
	.055 COLLECTION SAMPLE	Field Not in Use
	.06 ACCESSION NUMBER This is the blood bank accession. ANSWER MUST BE 1-20 CHARACTERS IN LENGTH	FREE TEXT
	.07 PHYSICIAN	Field Not in Use
	.08 WARD	Field Not in Use
	.09 PHLEBOTOMIST	Field Not in Use
	.1 DATE/TIME RECEIVED	Field Not in Use
	.12 ACCESSION LINK	Field Not in Use
	.99 SPECIMEN COMMENT (Subfile 63.199) Multiple This is a comment on the specimen. ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	
	.01 SPECIMEN COMMENT Answer must be 2-68 characters in length.	FREE TEXT

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
2.1	DIRECT AHG(POLYSPECIFIC) Polyspecific (broad spectrum) antiserum NOTE: In addition to free text, the user can select from entries in the AGGLUTINATION STRENGTH File (#62.55).	FREE TEXT
2.2	DIRECT AHG(5 min incub)	Field Not in Use
2.3	DIRECT AHG CC	Field Not in Use
2.4	ANTI-IgG Anti-human globulin (not broad spectrum) NOTE: In addition to free text, the user can select from entries in the AGGLUTINATION STRENGTH file (#62.55).	FREE TEXT
2.5	ANTI-IgG CC	Field Not in Use
2.6	ANTI-COMPLEMENT Anti-human globulin (complement specific) NOTE: In addition to free text, the user can select from entries in the AGGLUTINATION STRENGTH file (#62.55).	FREE TEXT
2.7	ANTI-COMPLEMENT (5 min incub)	Field Not in Use
2.8	ANTI-COMPLEMENT CC	Field Not in Use
2.9	DIRECT AHG INTERPRETATION Interpretation of the direct AHG	SET 'P' FOR POSITIVE; 'N' FOR NEGATIVE; 'I' FOR INVALID, USE EDTA SPECIMEN;
2.91	DIRECT AHG TEST COMMENT Any comment on the direct AHG test ANSWER MUST BE 1-80 CHARACTERS IN LENGTH NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB TESTING as the screen.	FREE TEXT
3	ELUATE ANTIBODY (Subfile 63.012) Multiple Selects only antibodies NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.	POINTER
.01	ELUATE ANTIBODY These are eluate antibodies. Selects only Blood group Antibodies NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.	POINTER TO FUNCTION FIELD FILE (#61.3)

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
4	SCREEN CELL METHOD (Subfile 63.014)	Field Not in Use
.01	SCREEN CELL METHOD	Field Not in Use
.02	TECHNIQUE	Field Not in Use
1	SCREEN CELL (Subfile 63.015)	Field Not in Use
.01	SCREEN CELL	Field Not in Use
.02	SOURCE	Field Not in Use
.03	INTERPRETATION	Field Not in Use
.04	IS	Field Not in Use
.05	37 C	Field Not in Use
.06	AHG	Field Not in Use
.07	CONTROL CELL	Field Not in Use
.08	ROOM TEMP	Field Not in Use
.09	12-18 C	Field Not in Use
.1	4 C	Field Not in Use
6	ANTIBODY SCREEN INTERPRETATION	SET 'N' FOR NEG; 'P' FOR POS;

If antibodies are present in the patient's serum the antibody screen interpretation will usually be positive.

6.1 RBC ANTIGEN PRESENT (Subfile 63.011) POINTER
Multiple
Antigens present on RBC's of patient are entered here.
Selects red blood cell antigens

NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier.

.01	RBC ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)

Antigens present on RBC's of patient are entered here.

NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier.

.02	COMMENT	FREE TEXT

Answer must be 1-80 characters in length.

6.2 RBC ANTIGEN ABSENT (Subfile 63.0112) POINTER
Multiple
Antigens identified as absent on red blood cells are entered here.
Selects red blood cell antigens

NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier.

.01	RBC ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)

Antigens identified as absent on red blood cells are entered here.

NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier.

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
	.02 COMMENT	FREE TEXT
	Answer must be 1-80 characters in length.	
6.3	HLA ANTIGEN PRESENT (Subfile 63.013)	Field Not in Use
	.01 HLA ANTIGEN PRESENT	Field Not in Use
	.02 COMMENT	Field Not in Use
6.4	HLA ANTIGEN ABSENT (Subfile 63.0114)	Field Not in Use
	.01 HLA ANTIGEN ABSENT	Field Not in Use
	.02 COMMENT	Field Not in Use
7	SERUM ANTIBODY (Subfile 63.46)	POINTER
	Multiple	
	These are the serum antibodies.	
	SELECTS ANTIBODIES	
	NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.	
	.01 SERUM ANTIBODY	POINTER TO FUNCTION FIELD FILE (#61.3)
	NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.	
	.02 ANTIBODY COMMENT	FREE TEXT
	ANSWER MUST BE 2-30 CHARACTERS IN LENGTH	
8	ANTIBODY SCREEN COMMENT (Subfile 63.48)	
	Multiple	
	These are antibody screen comments.	
	.01 ANTIBODY SCREEN COMMENT	FREE TEXT
	ANSWER MUST BE 2-80 CHARACTERS IN LENGTH	
	NOTE: In addition to free text, the user can select from entries in the LAB DESCRIPTIONS file (#62.5) which have BB TESTING as the screen.	
9	RBC TYPING METHOD (Subfile 63.018)	Field Not in Use
	.01 RBC TYPING METHOD	Field Not in Use
	.02 TECHNIQUE	Field Not in Use
1	ANTISERUM (Subfile 63.019)	Field Not in Use
	.01 ANTISERUM	Field Not in Use
	.02 LOT #	Field Not in Use
	.03 INTERPRETATION	Field Not in Use
	.04 IS	Field Not in Use
	.05 37 C	Field Not in Use
	.06 AHG	Field Not in Use
	.07 CONTROL CELL	Field Not in Use
	.08 ROOM TEMP	Field Not in Use
	.09 12-18 C	Field Not in Use
	.1 4 C	Field Not in Use

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
10	ABO INTERPRETATION	SET 'A' FOR A; 'B' FOR B; 'O' FOR O; 'AB' FOR AB; 'ND' FOR NOT DONE;
	This is the patient's ABO interpretation.	
10.2	ABO TYPING TECH	POINTER TO NEW PERSON FILE (#200)
	Technologist interpreting ABO typing results	
10.3	ABO TESTING COMMENT This is a comment on the ABO testing. ANSWER MUST BE 1-80 CHARACTERS	FREE TEXT
11	RH INTERPRETATION	SET 'NEG' FOR NEG; 'POS' FOR POS; 'ND' FOR NOT DONE;
	This is the patient's Rh interpretation.	
11.2	RH TYPING TECH	POINTER TO NEW PERSON FILE (#200)
	Technologist interpreting Rh typing results	
11.3	RH TESTING COMMENT This is a comment on the Rh testing. ANSWER MUST BE 1-80 CHARACTERS	FREE TEXT
121	PT CELLS+ANTI D (sal)	Field Not in Use
122	PT CELLS+RH CTRL (sal)	Field Not in Use
123	PT CELLS(sal)+ANTI D(hp IS)	Field Not in Use
124	PT CELLS(ser)+ANTI D(hp IS)	Field Not in Use
125	PT CELLS+ANTI D (hp 37)	Field Not in Use
126	PT CELLS+ANTI D (hp AHG)	Field Not in Use
127	PT CELLS+ANTI D SLIDE (hp)	Field Not in Use
128	PT CELLS(sal)+RH CTRL (hp IS)	Field Not in Use
129	PT CELLS(ser)+RH CTRL(hp IS)	Field Not in Use
129.1	PT CELLS+RH CTRL (hp 37)	Field Not in Use
129.11	PT CELLS+RH CTRL (hp AHG)	Field Not in Use
129.12	PT CELLS+RH CTRL SLIDE (hp)	Field Not in Use
131	INTERPRETATION OF RH TESTING	Field Not in Use
132	RH TEST COMMENT	Field Not in Use
133	PT Cells(sal)+Anti D(mod) IS	Field Not in Use
134	PT Cells(ser)+Anti D(mod) IS	Field Not in Use
135	PT Cells+Anti D(mod) 37	Field Not in Use

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)
136	PT Cells+Anti D(mod) AHG	Field Not in Use
138	PT Cells(sal)+RH Ctrl(sal) IS	Field Not in Use
139	PT Cells(ser)+RH Ctrl(sal) IS	Field Not in Use
139.1	PT Cells+RH Ctrl(sal) 37	Field Not in Use
139.11	PT Cells+RH Ctrl(sal) AHG	Field Not in Use
141	PT CELLS(ser)+ANTI A IS	Field Not in Use
142	PT CELLS(sal)+ANTI A IS	Field Not in Use
143	PT CELLS+ANTI A SLIDE	Field Not in Use
144	PT CELLS(ser)+ANTI B IS	Field Not in Use
145	PT CELLS(sal)+ANTI B IS	Field Not in Use
146	PT CELLS+ANTI B SLIDE	Field Not in Use
147	PT CELLS(ser)+ANTI A,B IS	Field Not in Use
148	PT CELLS(ser)+ANTI A,B (RT)	Field Not in Use
149	PT CELLS(sal)+ANTI A,B (IS)	Field Not in Use
149.1	PT CELLS(sal)+ANTI A,B (RT)	Field Not in Use
149.11	PT CELLS+ANTI A,B SLIDE	Field Not in Use
149.12	PT SERUM+A1 CELLS	Field Not in Use
149.13	PT SERUM+B CELLS	Field Not in Use
151	INTERPRETATION OF ABO TESTING	Field Not in Use
152	ABO TESTING COMMENT	Field Not in Use
153	INTERPRETATION ABO GROUP(cell)	Field Not in Use
154	INTERPRETATION ABO GROUP(ser)	Field Not in Use

File continues with other laboratory data for anatomic and clinical pathology.

Software Limitations

Functionality	Description of Software Limitations
Patient- Specimen Receipt & Order Entry	Manual system for patient/recipient armband identification. Manual system for recording and tracking the identification of the phlebotomist. Partial system for entry of blood component requests/orders (chart and SF518). No provision for a cumulative system of records for blood components requests within the Blood Bank software, (i.e., data is editable and represents only current information).
Patient - Test Result Entry (other than crossmatching)	No provision for test result interpretation based on actual testing results, (e.g. evaluation of reactions of antisera). Manual entry of test result interpretations of all required testing.
Patient - Unit Selection & Pretransfusion Testing	No provision for test result interpretation based on actual testing results, (e.g. evaluation of reactions of antisera). Manual entry of test result interpretations of all required testing. Manual documentation of previous history checks. No automatic updating and evaluation of donor recruitment/recall information based on actual donation data. Partial system for evaluating units selected versus blood component requests. No provision for evaluation of requirements for irradiation of directed donor units, i.e., unit from a donor who is a blood relative. No provision for evaluation of requirements for hemoglobin testing on units used for massive or exchange transfusions. No automatic provision for evaluation of specific component requirements, e.g., CMV negative units. No provision for performance of electronic crossmatch.
Patient- Transfusion Data Entry	No provision for electronic primary documentation of blood administration data. No provision for electronic documentation of autologous blood collected/transfused as part of preoperative salvage procedures.

Functionality	Description of Software Limitations
Patient - Investigation of Adverse Effects	No provision for test result interpretation based on actual testing results, e.g. evaluation of reactions of antisera. Manual entry of results of testing associated with transfusion reaction investigations. No provision for reporting pathologist's evaluation/summary of transfusion reaction investigations.
Patient - Records	Manual record-keeping system prior to the computerization with site determination regarding entry of "old" data. Manual record-keeping system for actual test results. Partial system for recording blood administration data, i.e., date/time of transfusion and whether patient had a reaction. Manual system of records for blood components requests, i.e., data within the Blood Bank software is editable and represents only current request information. No provision of record-keeping system for "look back" notifications.

Intended Uses

IU#	Functionality	Description of Intended Use
P1	Patient - General	Ability to set up a site parameter to indicate whether the fields for direct antiglobulin testing should be included in the edit template for entering ABO/Rh and antibody screening results.
P2	Patient - General	Ability for the site to define standardized canned comments that are accessible during data entry based on the entry in the Screen field (#5).
P3	Patient - General	Ability for the site to define consultation reports for both serum antibodies and positive direct antiglobulin tests.
P4	Patient - General	Ability for the site to define which antibodies are clinically significant and to designate what corresponding antigen should be lacking in units of red blood cells selected for a patient possessing that antibody.
P5	Patient - General	Ability for the site to define which test results should be displayed when accessioning blood bank specimens/entering blood component requests.
P6	Patient - General	Ability for the site to define types of transfusion reactions for selection in data entry.
P7	Patient - General	Provision of a unique cumulative record for each individual patient based on the data elements detailed above for the blood bank portion of the LAB DATA file (#63).
P8	Patient - General	Maintenance of patient record confidentiality for test results/transfusion histories by providing different levels of security access such that the type of data access can be defined by individual user.
P9	Patient - General	Site specific control to set up the entries in the BLOOD PRODUCT file (#66) for component specific requirements and algorithms to reflect facility operating procedures. See Section IX for a listing of the data elements and the description of their use.
P10	Patient - General	Limited simultaneous access by multiple terminals/ users to the same patient record for purposes of data entry for specified options.
P11	Patient - General	Cumulative patient data/transfusion record, including data on clinically significant antibodies, transfusion reactions and units transfused, updates immediately upon data entry.
P12	Patient - General	Displays patient transfusion record in reverse chronological order for a specified date range (in either detailed or summary format), including any history of previous transfusion reactions and entries in the ANTIBODIES IDENTIFIED field (#.075) or BLOOD BANK COMMENTS field (#.01) of the LAB DATA file (#63). User can also specify the component if so desired.
P13	Patient - General	Limited access to those units currently assigned to the same division as the user.
P14	Patient - General	Accommodation of the use of a bar code reader for entry of the unit ID
P15	Patient - General	Tracking of changes in verified data for specific data elements defined for the LAB DATA file (#63).
P16	Patient - General	Tracing of verified data entered for critical data elements as detailed for the LAB DATA file (#63) when entered via the supervisory edit options requiring a higher level of security
P17	Patient - General	Tracking of the person entering the data into the computer

IU#	Functionality	Description of Intended Use
P18	Patient - General	Elimination of the need for duplicate data entry by also updating the unit record immediately upon data entry.
P19	Patient - General	Display of patient demographics, including first and last names, social security number, date of birth, ABO/Rh of record (if one exists), and admitting diagnosis.
P20	Patient - General	Display of an alert message for any patients with a previous antibody history, regardless of division, based on entries in the Antibodies Identified field (#.075).
P21	Patient - General	Display of previous transfusion reactions, regardless of division, for both unit specific and non-unit specific reactions.
P22	Patient - General	Display of an alert message for any patients who have autologous and/or directed units in inventory, regardless of the division, based on a match in the Restricted For field (#8) of the unit.
P23	Patient - General	Limited component selection to those components for which the Can Be Requested field (#.15) in the BLOOD PRODUCT file (#66) =YES and which are assigned to the appropriate division.
P24	Patient - General	Provision of a variety of reports that can be used for supervisory review. Including one which details the patient's ABO/Rh, AB Screen results, DAT results and serum/eluate antibodies, for the current specimen and a specified number of previous specimens, as well as entries in the Antibodies Identified field (#.075) and the Blood Bank Comments field (#.01).
P25	Patient - General	Entry of special instructions in the Blood Bank Comments field (#.01) regarding specific component requirements.
P26	Patient - Old Records	Entry of previous transfusion history, ABO/Rh, clinically significant antibodies, red cell phenotyping and transfusion reactions.
P27	Patient - Old Records	Provision of access to fields for entry of comments/special instructions, which might be relevant for future reference.
P28	Patient - Old Records	No entry of historical unit information, if unit is in the current BLOOD INVENTORY file #65.
P29	Patient - Old Records	Ability to edit information entered from old records prior to computerization, (i.e., cannot access units in the BLOOD INVENTORY file (#65)). (Requires a higher level of security access).
P30	Patient - Specimen Receipt & Order Entry	Ability for the site to define Blood Bank tests in the LABORATORY TEST file (#60) which can be ordered by both Blood Bank personnel and other hospital personnel, e.g., transfusion request, type and screen, etc.
P31	Patient - Specimen Receipt & Order Entry [LREV]	Display of test description information based on entries for the specific test in the LABORATORY TEST file (#60).
P32	Patient - Specimen Receipt & Order Entry [LREV]	Ability to accept orders for Blood Bank tests which are entered through other software packages and to update the status of the order as appropriate.
P33	Patient - Specimen Receipt & Order Entry	Displays a listing of accessions for the patient for a specified accession area, including previous transfusion reaction information and data from the Antibodies Identified field (#.075) and the Blood Bank Comments field (#.01) if data exists.
P34	Patient - Specimen Receipt & Order Entry	Ability for the Blood Bank personnel to enter component requests, for those which can be requested, for a specific patient.

IU#	Functionality	Description of Intended Use
P35	Patient - Specimen Receipt & Order Entry	Check to determine whether a previous specimen has been accessioned which was collected within the last 72 hours, regardless of division.
P36	Patient - Specimen Receipt & Order Entry	Evaluation of the age of patient specimens available for the specific accession area and appropriate division to determine whether any meet the requirements based on the entry in the Maximum Specimen Age field (#16) of the BLOOD PRODUCT file (#66) for the specific component.
P37	Patient - Specimen Receipt & Order Entry	Display of the most recent lab values for specified tests to allow auditing of the request based on locally defined parameters.
P38	Patient - Specimen Receipt & Order Entry	Ability for the site to define, by specific surgical procedure in the OPERATIONS (MSBOS) file (#66.5), by specific blood component, the maximum number of units which may be requested without additional justification.
P39	Patient - Specimen Receipt & Order Entry	Evaluation of pre-operative component requests against audit criteria as defined by the facility.
P40	Patient - Specimen Receipt & Order Entry	Ability for the site to define specific audit criteria for pre-op and non pre-op requests, by blood component.
P41	Patient - Specimen Receipt & Order Entry	Evaluation of requests against facility defined audit criteria for the specific component and current lab results, flagging requests which may be potentially inappropriate and allowing for input of additional justification for those requests.
P42	Patient - Specimen Receipt and Order Entry	Capture of appropriate data for evaluation of ordering practices by treating specialty through a variety of different reports.
P43	Patient - Specimen Receipt and Order Entry	No deletion of accession if there is verified data entered for that accession.
P44	Patient - Test Result Entry (other than crossmatching)	Creation of the patient's historical ABO/Rh record based on the first entry of ABO/Rh results for the patient.
P45	Patient - Test Result Entry (other than crossmatching)	Requirement for the use of a separate option to edit the patient's historical ABO/Rh record. (Requires a higher level of security access).

IU#	Functionality	Description of Intended Use
P46	Patient - Test Result Entry (other than crossmatching)	Comparison of current ABO/Rh interpretations to patient history and display of a warning message if a discrepancy exists.
P47	Patient - Test Result Entry (other than crossmatching)	Display of a warning message on those patients who have no previous history to be used for comparison with current results.
P48	Patient - Test Result Entry (other than crossmatching)	Automatic display of patient medications (both inpatient and outpatient, oral and IV) for patients upon entry of a positive direct antiglobulin test.
P49	Patient - Test Result Entry (other than crossmatching)	Ability to view patient's medications, i.e. both inpatient and outpatient oral and IV.
P50	Patient - Test Result Entry (other than crossmatching)	Tracking of data entry errors for ABO/Rh when comparisons with previous history fail to match even if data is corrected since such errors might adversely affect the patient if not caught.
P51	Patient - Test Result Entry (other than crossmatching)	If changes are made in verified data for ABO/Rh testing, antibody screening or direct antiglobulin testing, automatic generation of a comment "reported incorrectly as" to indicate the original data. This comment is then included on the Blood Bank Test Report.
P52	Patient - Test Result Entry (other than crossmatching)	Ability to generate a cumulative Blood Bank Test Report which includes the patient demographics (name, SSN, DOB and historical ABO/Rh), antibodies identified, the test results of individual specimens (ABO, Rh, Direct AHG, Antibody Screen, Serum Antibody and Eluate Antibody), and if requested, the current component requests.
P53	Patient - Test Result Entry (other than crossmatching)	Creation of a print queue upon entry of test results and provides the ability to either print the Blood Bank Test Report in batches for all patients in the queue or to delete the queue.
P54	Patient - Test Result Entry (other than crossmatching)	Custom consultation reports for patients with irregular antibodies and/or positive direct antiglobulin tests based on data entered for specific specimen and site specific file set-ups.
P55	Patient- Unit Selection & Pretransfusion Testing	No selection of units which are expired through the usual option, requiring a different option and a level of security access to enter compatibility information and assign an expired unit to a patient.
P56	Patient- Unit Selection & Pretransfusion Testing	Ability to assign units or enter crossmatch results if the age of the specimen exceeds the maximum requirements for the specific component requires a higher level of security access and a different option than that used routinely.
P57	Patient- Unit Selection & Pretransfusion Testing	Predefined algorithm and parameters defined for the specific component, to prevent selection of units that are not ABO/Rh compatible.
P58	Patient- Unit Selection & Pretransfusion Testing	Ability to assign a unit which is not ABO/Rh compatible according to the component specific parameters, requiring a higher level of security access and a different option than that used routinely.

IU#	Functionality	Description of Intended Use
P59	Patient- Unit Selection & Pretransfusion Testing	User controlled choice as to whether selection of units should be limited to those not currently assigned to another patient.
P60	Patient- Unit Selection & Pretransfusion Testing	Display of any entries in the LAB DATA file (#63), Blood Bank Comments field (#.01) including those which might detail specific component needs.
P61	Patient- Unit Selection & Pretransfusion Testing	Display of a warning message if the current volume is less than the average volume for the component if it is a pediatric component.
P62	Patient- Unit Selection & Pretransfusion Testing	Display of a message indicating the number of days left before expiration of unit.
P63	Patient- Unit Selection & Pretransfusion Testing	Prevents access to units which have not been appropriately 'selected' unless data is entered via a different option with a higher level of security and an automatic audit trail.
P64	Patient- Unit Selection & Pretransfusion Testing	Algorithm to evaluate confirmatory testing and display of a warning message if required testing has not been completed.
P65	Patient- Unit Selection & Pretransfusion Testing	No change in the unit status to make the unit available for subsequent issue if the unit recheck results do not match the unit log-in information.
P66	Patient- Unit Selection & Pretransfusion Testing	No ability to delete the patient's historical record of ABO/Rh.
P67	Patient- Unit Selection & Pretransfusion Testing	Comparison of the unit ABO/Rh to the patient history and prevents unit selection if there is no patient ABO/Rh on record.
P68	Patient- Unit Selection & Pretransfusion Testing	Entry of crossmatch interpretation prevented if no ABO/Rh results have been entered on the current specimen.

IU#	Functionality	Description of Intended Use
P69	Patient- Unit Selection & Pretransfusion Testing	Display of a warning message if no results are entered for the antibody screening on the current specimen.
P70	Patient Unit Selection & Pretransfusion Testing	Generation of a label containing patient identification and unit information to be attached to the tie tag for the unit in order to minimize opportunities for transcription errors.
P71	Patient- Unit Selection & Pretransfusion Testing	Algorithm to evaluate unit phenotyping of allogeneic (homologous and directed) units, against clinically significant patient antibody in order to prevent selection of the unit for the patient if the corresponding antigen is present in the unit.
P72	Patient- Unit Selection & Pretransfusion Testing	Evaluation of unit phenotyping of allogeneic (homologous) units against clinically significant patient antibody and display of a warning message if the corresponding Ag is not entered in the RBC Antigen Absent field (#.05).
P73	Patient- Unit Selection & Pretransfusion Testing	Determination as to whether crossmatch result is required for the specific component.
P74	Patient- Unit Selection & Pretransfusion Testing	Status change to 'assigned' for subsequent issue is prevented if the crossmatch result is anything other than' C' or 'IG'.
P75	Patient- Unit Selection & Pretransfusion Testing	Status change to allow issue of the unit is prevented unless the initials entered match those of the user and the user also holds the appropriate security key.
P76	Patient- Unit Selection & Pretransfusion Testing	Release of units back to available inventory if the result entered for the crossmatch is not 'C' or 'IG'
P77	Patient- Unit Selection & Pretransfusion Testing	No ability to select units not associated with the appropriate division (even autologous)
P78	Patient- Unit Selection & Pretransfusion Testing	Selection of autologous unit for a different patient than the patient designated is prevented.
P79	Patient- Unit Selection & Pretransfusion Testing [LRBLQPR]	Automatic display of the current information on component requests and units assigned/available for issue.
P80	Patient - Transfusion Data Entry	Calculation of the number of units in a pool and entry of the data in the Pooled/Divided Units field for the pooled product which was created if a pooled product is transfused.

IU#	Functionality	Description of Intended Use
P81	Patient - Transfusion Data Entry	Entry of unit specific transfusion reaction data, (i.e., type of reaction and appropriate comments).
P82	Patient - Transfusion Data Entry	Entry of future transfusion dates prohibited.
P83	Patient - Transfusion Data Entry	Capture of appropriate data for evaluation of transfusion practices by treating specialty through a variety of different reports.
P84	Patient - Investigation of Adverse Effects	Entry of transfusion reaction data which is unrelated to a specific unit.
P85	Patient - Investigation of Adverse Effects	Report of transfusion data, sorted by patient, including both reactions associated with a specific unit and those not associated with specific units.
P86	Patient - Investigation of Adverse Effects	Report for use in identifying potential cases of transfusion transmitted disease, based on search of those patients transfused within the previous six month period for specific patient test results using facility specified tests and facility defined values.
P87	Patient - Management/ Quality Improvement	Report of crossmatch transfusion ratios, sorted by treating specialty, in either summary or detailed format to allow a review of ordering patterns.
P88	Patient - Management/ Quality Improvement	Report of patient's crossmatched for a specified date range, sorted by date/time crossmatched, to allow a review of ordering patterns. Report includes specimen info, unit ID, XM result, outcome of XM (released or transfused) and statistics on the # of patients crossmatched, # of specimens crossmatched, # of units transfused, the C:T ratio and the # of crossmatches for each result (C, IG, etc.).
P89	Patient - Management/ Quality Improvement	Report of autologous unit dispositions, sorted by whether the unit was transfused or not, including the patient information, treating specialty if unit was transfused, component, unit ID and the number of days in inventory, to allow evaluation of utilization patterns.
P90	Patient - Management/ Quality Improvement	Mechanism to identify units with a prolonged infusion time, based on component specific local parameters for maximum infusion time.
P91	Patient - Management/ Quality Improvement	Administrative data report which detail data requested on the annual AABB questionnaire, sorted into inventory and donor groupings.
P92	Patient - Management/ Quality Improvement	Report of potentially inappropriate transfusions based on the auditing done during specimen log-in /order entry, sorted by location to which the unit was issued for transfusion.
P93	Patient - Management/ Quality Improvement	Patient report for use in outcome assessments, integrating transfusion episodes and clinical lab results for site selected tests. User can request the report for specific patients and date ranges or specify that reports should be printed for all patients transfused within a specified date range.

IU#	Functionality	Description of Intended Use
P94	Patient - Management/Quality Improvement	Hard copy listing of patients who have been transfused for a specified treating specialty, for a specified date range.
P95	Patient - Management/Quality Improvement	Report of all units transfused within a specified date range, sorted in alphabetical order by patient, and in chronological order for the specified disposition dates. Report includes patient name and SSN, unit ID, component, # in pool if appropriate, volume, inspection information, issue location, transfusion date/time and transfusion reaction information.
P96	Patient - Management/Quality Improvement	Report of all units transfused within a specified treating specialty, a specified component and a specified date range, sorted by treating specialty, then by component, then alphabetically by patient. Report includes patient transfused, transfusion date/time, primary care physician, cost, unit ID and statistics for each treating specialty on # patients given RBC components, # patients given non-RBC components and cost.
P97	Patient - Records	Permanent on-line storage of Blood Bank data, i.e. data is not included in algorithm used for archiving patient test results.
P98	Patient - Records	Hard copy listing of patients who have clinically significant antibodies.
P99	Patient - Records	Hard copy listing of patients who have Blood Bank data for reference during computer downtimes. Report includes the patients historical ABO/Rh, any clinically significant antibodies or special instructions, and if requested, results of the most recent ABO/Rh and Antibody Screen. User can specify the range of patients and whether all patients with BB data should be included or if listing should be limited to those with antibodies or comments.
P100	Patient - Statistics	Capture of workload information and feeds data to non-BB laboratory files which is subsequently used for a variety of local and national reports, including the CAP Laboratory Management Index Program and DSS.