BLOOD BANK/TRANSFUSION SERVICES

Services Available

The hospital Blood Bank offers Pre-transfusion testing and other blood group related serological tests useful for prenatal, newborns, hematological diseases, immune deficiencies and "disease" studies.

All blood and blood components available are from volunteer donors through the auspices of the VT-NH Regional Blood Services, American Red Cross. A Circular of Information for the Use of Human Blood and Blood Components, a publication of the American Red Cross and American Association of Blood Banks, is available from Porter Hospital Laboratory.

Requisition

☑ All requests for routine Blood Banking for blood type, pre-natal workups, and antibody screens, and outpatient fetal screens and cord blood workups are made on routine outpatient requisition.
☑ Requests for inpatient blood banking are made on the Blood Bank I Requisition or via electronic order.
☑ All requests for blood or components to be transfused are made on the BLOOD TRANSFUSION ORDER FORM.

Rh Immune Globulin

Rh Immune Globulin is available for patients admitted to Porter Hospital, Porter Emergency Department, or Porter Surgical Unit. Outpatients need to obtain Rh immune from their health care provider.

Autologous (Self-Donated) Donation And Transfusion

The Porter Laboratory Blood Bank does not collect donor units. Patients wishing to donate blood for their own use during a scheduled surgery may be referred to Special Collections of the New England Regional Blood Services, American Red Cross at 1-800-843-3500 or (802) 658-6400. Donations should be scheduled within 3 to 5 weeks before the surgical date.

Directed (Designated) Donors

If a patient having elective surgery wishes to have blood donated by friends and relatives, arrangements may be made by contacting the Special Collections of the New England Regional Blood Services, American Red Cross at 1-800-843-3500 or (802) 658-6400. Donations should be scheduled for no closer than 1 week before the scheduled surgery date and may be scheduled for 5 weeks beforehand.

Outpatient Transfusions

Porter Hospital provides transfusion services for outpatients. An appointment for the transfusion should be scheduled directly with the Medical Surgical Floor, Charge Nurse, Monday through Friday. A BLOOD TRANSFUSION ORDER FORM is required and must be completed and faxed to Medical-Surgical Unit or completed via phone when appointment is made with charge nurse. The specimen for compatibility must be collected at Porter Hospital Laboratory within three days of or the day of (allow at least 3 hours for testing) the transfusion. It is highly suggested that the specimen is collected at least one day prior to transfusion to allow reasonable time to complete testing and secure units (see Positive Antibody Screens). If the patient is unable to come to the lab for collection of this specimen, arrangements for submitting the specimen may be made with the supervisor of the laboratory.
Explanation of Blood Bank Tests

Hold Clot
☑ A member of the laboratory staff collects a blood sample from the patient that is suitable for performing a blood type, antibody screen, and compatibility testing. The patient is identified by stating name and date of birth to phlebotomist at time of blood collection, the hospital wristband information is verified against order, and a second unique band (commonly called Typenex or Blood Bank band) is placed on arm or leg of patient by the phlebotomist. This band has the patient’s name, date of birth, date and time of collection of sample, and phlebotomist’s initials on it as well as a unique number that is used on all specimen tubes and paperwork generated from this request. A matching label from this band is applied to the blood sample and a Blood Bank I requisition is completed documenting the collection and the band number used.
☑ Tests Performed: No laboratory testing is done. Documentation of specimen collection, that the sample is acceptable, and that the band was applied is maintained in the LIS and on patient report. The sample is held 48 hours for possible orders. The reason it is held only 48 hours is because the antibody screen test must be completed within 48 hours of blood collection.
☑ If the patient band is removed, a new sample will need to be obtained.

Type and Hold (T&H)
☑ This order is generated on every admitted Obstetrics patient. The lab collects a blood specimen as stated above.
☑ Tests Performed: ABO/Rh. The sample is held 48 hours for possible further testing including Antibody Screen and compatibility testing which can be added to this sample within the 48 hour time period without the need to redraw the patient.

Type and Screen (T&S)
☑ This order is generated on a patient if there is a possibility of transfusion. The lab collects a blood specimen as stated above.
☑ Tests Performed: ABO/Rh and Antibody Screen. The lab tech checks blood bank inventory to ensure 2 units of ABO compatible blood are present. The units are required to ABO compatible, but may NOT be type specific.

Type and Crossmatch (T&C)
☑ This order is generated on a patient when a transfusion is highly likely. The lab collects a blood specimen as stated above. If a transfusion is planned, a Transfusion Order Form must also be completed.
☑ Tests Performed: ABO/Rh, Antibody Screen, and Compatibility testing for the number of units specified on the order. The units will be ABO compatible, but may NOT be type specific.

Positive Antibody Screens
☑ If a patient has a positive antibody screen, the patient must have an Antibody Identification performed before any units will be available for transfusion. Porter’s reference lab for this is the American Red Cross (ARC). Fresh samples (4 vials) must be collected from the patient and transferred via courier to ARC in Burlington for this identification to be completed. Once the antibody identification is complete, the ARC tries to find units negative for the antigen(s) the patient has antibodies for. When a patient has multiple antibodies, the difficulty of finding compatible units increases and locating compatible units can take several hours to several days.
30-Day Clot Protocol

If a patient is scheduled for surgery or transfusion and has not been pregnant or received blood or blood products in the last three months, s/he qualifies for 30-day clot protocol. This allows the blood clot to be utilized for 30 days as long as no blood or blood products are transfused. If blood is transfused, the initial blood sample can only be used for 72 hours for compatibility testing.

Typenex Procedure

The Typenex Band is designed to serve as a patient sample identification system for patients that will or may be receiving blood or blood products. It may also be used for ID on unidentified emergency cases. It is the phlebotomist's responsibility to attach and assign the Typenex band to a potential transfusion candidate. The phlebotomist will positively identify the patient by asking the patient his complete name and date of birth, and if an admitted patient, verifying information from wristband. All information must correspond with Blood Bank I requisition. If the patient is not able to state name and date of birth, have someone who knows patient, identify patient. The phlebotomist must then obtain blood sample suitable for blood bank testing and do the following:

1. Using a pen and by pressing hard, print the patient's name, birth date, date & time of sample collection, and phlebotomist's initials onto the blank area on the Typenex band.
2. Pull the sticky name label off and place on the blood bank tube. Pull the first number sticker in the series off the band and place on the additional blood tubes that are drawn. For codes or unidentified patients, place a Typenex number on all tubes drawn.
3. Pull an additional Typenex number off and attach to area indicated for Typenex number on Blood Bank I. The phlebotomist will sign under the 'collection' statement with their complete name, date, and time.
4. Attach the Typenex band to the wrist along side the hospital band. This must be done or witnessed by the person collecting the sample. If the collection information and/or signature are missing, or the phlebotomist does not apply the band, the laboratory will reject the sample.
5. The band will stay on the patient for four days (96 hours). The nursing staff may call to request removal if there is no further indication of blood product transfusion or if it is in the way of a needed IV site. If the band is removed and the patient is still receiving blood products, a new band must be assigned by the laboratory staff before products can be transfused.