# Transfusion General Information

## Sample and request form labelling.

Requests for transfusion services should be made on the appropriate CDDFT Blood Transfusion request form that has been correctly completed and signed by a doctor or entitled 'Nurse Practitioner'. The form should be accompanied by the appropriate sample (sample type dependent upon test requested – please refer to test directory for details).

All routine patient samples must have the minimum core identifiers accurately and legibly handwritten on the specimen and also on the CDDFT Blood Transfusion request form. The minimum core identifiers and information are outlined in the table over page (see Policy POL/Transfusion/0012 - Patient Sampling & Labelling, for further details). Pre-printed labels can be used on the request form only. The request form declaration must be signed by the person taking the sample, or will be rejected.

| | | Request Form | Sample |
|---|---|---|---|
| Mandatory Core Information | Labelling requirements | Printed labels permitted | MUST be HANDWRITTEN |
| | First Name | ✓ | ✓ |
| | Surname | ✓ | ✓ |
| | Date of Birth (not age) | ✓ | ✓ |
| | Hospital or NHS Number | ✓ | ✓ |
| | Gender | ✓ | |
| | Signature (or initials on sample only) of person taking sample | ✓ | ✓ |
| | Date of sample collection | ✓ | ✓ |
| | Time of sample collection | ✓ | ✓ |
| | Transfusion Requirements (Products & Quantity) | ✓ | |

Please note if patient is unconscious or unidentifiable, the above applies, but the patients first name, surname, date of birth and NHS or Hospital number is replaced with a unique identifier (trauma number) and the patients' sex, which is required to aide in the selection of appropriate blood products. Provision of estimation of age, if possible, should also be provided to guide product issue.

ICE request forms are accepted from GP surgeries as a supply of Blood Transfusion request forms may not be readily available at your practice or in the community, the acceptance criteria outlined above still applies. The ICE requests do not record the time and date that the sample was taken, if using ICE request forms please ensure this information is written on both the request form and the sample. Please ensure that the request is signed by the person taking the sample and that they also sign (or initial) the sample.

## Zero Tolerance Policy

The safety of the blood transfusion process depends on accurate patient and sample identification at all stages of the process, starting crucially with positively identifying the patient from whom the blood transfusion sample is being taken from (and labelling by the bedside). This is why CDDFT operates a Zero Tolerance approach to mislabelled specimens and forms and amendments once it has been received by the laboratory, in line with National Guidelines, as studies have shown that a Wrong Blood In Tube (WBIT) Sample is 40-fold more likely to be found in a specimen that is also mislabelled. The Zero Tolerance Policy means that any discrepancy between specimen and form, with regard to any of the minimum core identifiers, or missing core information (see table above), will result in the specimen being rejected, and a repeat sample and request form will be requested from the requesting clinician at the earliest opportunity. The Zero tolerance policy also mandates that we will not allow the core patient identifiers on the request form or sample, to be amended or added to, once it has been received by the transfusion laboratory. In an emergency situation suitable group O un-cross-matched blood will be issued until an adequately labelled specimen and request form has been received.

## Two Sample Rule and Issue of Blood Components

Blood transfusion safety begins with collection of the sample. BSH Guidelines recommend that a second sample is requested for conformation of the ABO group of a first time patient, where this does not impede the delivery of urgent red cells or other blood components, with the aim of preventing ABO incompatible transfusions. This is known as the 'Two Sample Rule' and was introduced at CDDFT in March 2020.

Continue to take group and screen samples as normal. Please DO NOT TAKE two samples at the same time. The laboratory has a massive database of historical blood groups which may not be visible to the user, if a crossmatch is requested on a patient without a historical group, the laboratory will telephone the clinical area to inform them that a confirmation group is required. If the confirmation group is required within 12 hours of the first sample being obtained a visually distinctive sample tube will need to be collected from the laboratory. This will not cause a delay to the issue of blood as universal blood group components will be issued if appropriate in an emergency.

## Sample Stability and Transportation

Whole Blood EDTA samples deteriorate over a period of time, therefore must be received by the laboratory for testing up to 48 hours after taken when stored between 18-25$^{o}$C (BSH Compatibility Guidelines 2012). Samples prior to testing must not be subjected to temperature extremes.

## Sample Suitability

Samples that are old, wrongly labelled, incorrect specimen type, haemolysed, icteric, grossly lipaemic, clotted or insufficient are not suitable for analysis.