


6. Test records not entered into the computer may include antibody identification studies, transfusion reaction investigations and tests sent to the ARC Reference Laboratory. Separate written reports are generated, reviewed by the Medical Director of Blood Transfusion Service and charted for these tests.
7. A report of issued and transfused units is generated daily for comparison to Blood Release forms to ensure units are in appropriate status. The BTS supervisor or designee must be notified when discrepancies on the log are detected.
8. Draw a single line through the error along with tech initials and date to correct recorded results. Record the correct information above or nearby. Overwritten information is not acceptable. The use of "White-out" or other means of obliteration is likewise unacceptable. Incorrect results entered into the computer must be invalidated by the BTS supervisor or designee. The correct results are then reported.
9. The Blood Transfusion Service Supervisor or designee reviews the following:
 - Exception reports from BBIS are reviewed daily at the conclusion of investigation and resolution of problems.
 - Daily Billing report.
 - Blood release forms are reviewed for indications, informed consent and RN signature. Correct unit status is ensured by review of Issued and Transfused Units log.
 - Special studies, including antibody identification and elution studies.
 - Transfusion reaction investigations.
 - Monthly results of reagent quality control, instrument function checks and equipment temperature monitoring.
 - Orphan Unit Cross Check Report
10. The Blood Transfusion Service Medical Director reviews the following:
 - Special Studies, including antibody identifications and elution studies. Written reports, if necessary, are signed before release.
 - Transfusion reaction investigations. Results are interpreted, reported and signed by the Medical Director.

<p>Approved by:</p> <div style="text-align: center; margin: 10px 0;">  </div> <hr style="width: 80%; margin: 0 auto;"/> <p>Robert L. Booth, Jr., M.D. Date Associate Professor Director, Clinical Pathology/Hematopathology</p> <p>Review/Revision Completed By: Michelle Bartkowiak, MT(ASCP)SBB</p>	<p>Review/Revision Date:</p> <p>6/96 6/9/2008 1/98 3/99 11/99 10/00 1/05 1/2008</p> <hr style="width: 100%;"/> <p>Next Review Date: 6/1/2011</p>
<p>Policies Superseded by This Policy:</p> <p style="margin-left: 20px;"><i>It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.</i></p>	

References:

AABB Standards for Blood Banks and Transfusion Services, current edition.
 Guidance for Industry, Current Good Manufacturing Practice for Blood and Blood Components, U.S. Department of Health and Human Services, Food and Drug Administration, Center for Biologics Evaluation and Research (CBER), September 1998.