

Name of Policy: Confirmation of Donor Blood Type

Policy Number: 3364-108-304

Approving Officer: Senior Hospital Administrator  
Director, Blood Transfusion  
Service

Responsible Agent: Blood Transfusion Service  
Supervisor  
Administrative Director, Lab

Scope: University of Toledo Medical Center  
Pathology/Laboratory – Blood Bank



Effective date: 03/01/2025

Original effective date: 10/1986

Key words: Confirmation, Donor, Blood Type, ABO, Rh

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New policy proposal

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Minor/technical revision of existing policy

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Major revision of existing policy

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Reaffirmation of existing policy

(A) (A) Policy Statement

The Blood Transfusion Service must confirm the blood type of all RBC units received for transfusion.

(B) (B) Purpose of Policy

To minimize the risk of hemolytic transfusion reactions and to optimize post-transfusion survival of donor red blood cells.

(C) (C) Procedure

(1) Enter unit information into computer using procedure in Computer Manual.

1.(2) Inspect unit for abnormal appearance such as color, hemolysis, clots, and bag integrity. Enter unit inspection findings into the computer system (satisfactory or unsatisfactory).

2.(3) Perform the following tests according to procedure on all RBC units received for transfusion:

➤(a) ABO type (forward type only)

➤(b) D type on all Rh-negative units. Tests for weak D are not required.

3.(4) If there is a discrepancy between the test results and the unit label, repeat the test using another segment and ABO/Rh typing antiserum from a different

manufacturer. Quarantine the blood until the discrepancy is resolved or report the discrepancy/return the unit to ARC.- Document on Lab Occurrence form.

- 4.(5) Segments from transfused donor units are retained for a minimum of 21 days. Wrap an ARC source number sticker around one segment from each unit and store the segment in a plastic bag marked with the receiving date and the date for discard (two months from received date). -Store the plastic bag in the Zone 1 refrigerator, ~~bottom right shelf~~. A new bag must be started daily and marked appropriately.
- (6) Donor units containing antibodies may be transfused to any patient, but it may be preferable to hold these units for transfusion to those who have been typed as negative for the corresponding antigen.

(D) References

- 5.(1) AABB Standards for Blood Banks and Transfusion Services, current edition

<u>Approved by:</u>  <u>Lauren Stanoszek, M.D.</u> <u>Assistant Professor</u> <u>Director, Blood Transfusion Service</u>  <u>Date</u>  <u>Russell Smith Pharm D, MBA, BCPS, CPEL,</u> <u>FACHE</u> <u>Senior Hospital Administrator</u>  <u>Date</u>  <u>Review/Revision Completed by:</u> <u>Danielle Weinau MLS(ASCP)<sup>CM</sup></u>	<u>Policies Superseded by This Policy:</u> <u>• None</u>  <u>Initial effective date: 10/1986</u>  <u>All Review/Revision Dates:</u> <u>6/96</u> <u>7/96</u> <u>2/99</u> <u>8/00</u> <u>11/03</u> <u>1/05</u> <u>1/2008</u> <u>6/9/2008</u> <u>3/22/2011</u> <u>3/01/2013</u> <u>3/2/2015</u> <u>3/1/2017</u> <u>3/1/2019</u> <u>3/1/2021</u> <u>3/20/2023</u> <u>03/01/2025</u>  <u>Next review date: 03/01/2027</u>
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Reference: ~~AABB Standards for Blood Banks and Transfusion Services, current edition~~