

Name of Policy: <u>Lookback Protocol</u> Policy Number: 3364-108-503 Department: Pathology/Laboratory – Blood Bank Approving Officer: Chief Operating Officer - UTMC Director, Blood Transfusion Service Responsible Agent: Blood Transfusion Service Supervisor Administrative Director, Lab Scope: Pathology/Laboratory – Blood Bank	 Effective Date: 03/20/2023 Initial Effective Date: 10/1986		
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy </td> <td style="width: 50%; border: none;"> <input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy </td> </tr> </table>		<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy
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(A) Policy Statement

The Blood Transfusion Service participates in Look-back programs according to AABB and ARC standards.

(B) Purpose of Policy

To prevent infectious disease transmission and identify transfusion recipients that may be candidates for testing and counseling services.

(C) Procedure

The American Red Cross has a policy to notify Blood Transfusion Services of blood units from previous donations when donors’ current donation tests positive for anti-HIV-1/HIV-2, anti-HTLV I, anti-HCV, HCV NAT, HIV NAT, HBV DNA NAT or WNV NAT. Recipients of past donations from these donors are considered "at risk" and must be identified and offered testing. If confirmed positive, the recipient is offered counseling for clinical management and to reduce the possibility of spreading infection. Testing and counseling services are also provided by American Red Cross Blood Services, Donor and Client Support Center (ARCDCSC).

1. The Lookback procedure is initiated by the ARCDCSC following confirmation of donor's positive tests.
2. ARCDCSC will notify the UTMC Blood Transfusion Service (BTS) Medical Director by letter, identifying the implicated blood component units.
3. The UTMC BTS Medical Director or designee ascertains the final disposition of the implicated blood units. If the unit was transfused, the recipient's name, hospital identification number and the attending physician are recorded on the ARCDCSC form. The completed ARCDCSC notification form is returned to the ARCDCSC Medical Director.
4. The UTMC BTS Medical Director notifies the attending physician in writing and provides the physician with a copy of the completed ARCDCSC notification form. Information concerning resources for testing and counseling services is provided to the physician. The resources include but are not limited to the following:
 - a) HIV Clinical Nurse Specialist (AIDS Resource Team – ART)
 - b) HIV Psych Clinical Nurse Specialist
 - c) Infection Control Practitioner
 - d) ARCDCSC
5. The UTMC BTS Medical Director notifies the Risk Management department. If the recipient’s physician is unwilling or unavailable to contact the recipient, Risk Management (in collaboration with the AIDS Resource Team or the Infection Control Practitioner in the case of HCV and other viral tests) will contact the recipient on the attending physician's behalf. Required written documentation and notification

