Name of Policy:	Autologous and Directed Donor Units	TIPD THE UNIVERSITY OF TOLEDO
Policy Number:	3364-108-205	MEDICAL CENTER
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: 6/1996
		revision of existing policy

(A) Policy Statement

The Blood Transfusion Service specially monitors and restricts the availability of blood and components for patients when autologous or directed donations are ordered.

(B) Purpose of Policy

To assure that autologous and directed donations are utilized first and exclusively for patients requesting this special service.

(C) Procedure

- 1. Abnormal disease marker testing units are handled according to ARC Memo dated June 25,1991 (Handling of autologous donor units with abnormal disease marker testing.) Units from donors with abnormal disease marker or history of disease or high risk behaviors that would result in deferral for routine blood donation will be labeled with "Blood/Body Fluid Precaution" label. Units from donors with confirmed reactive HBsAg and/or HIV testing will be shipped to UTMC only by written request of both the ordering surgeon and the BTS Medical Director.
- 2. Receiving Autologous or Directed Donor units -enter units into inventory as per BBIS procedure. Units will be crossmatched to the autologous recipient according to routine pretransfusion testing procedure.
- 3. Storage Available (not crossmatched) autologous and directed donor units are stored on designated shelves in the Zone 6 (available inventory) refrigerator. Reserved (crossmatched) autologous or directed donor units are stored on the appropriate blood type shelf in Zone 3 (reserved inventory). Place auto/DD units in designated red containers in front of allogeneic units crossmatched for the patient to assure auto/DD units are used in the order stated below. Allogeneic units crossmatched for Auto/DD patients shall bear a sticker stating "Patient has Autologous blood" or Patient has Directed Donor blood" as appropriate.
- 4. *Issuing units* write "AUTO PC" or "DD PC" as appropriate on the O.R. Delivery Record. Issue <u>only</u> autologous units first. Issue directed donor units next. Additional crossmatched allogeneic units must be held in the Blood Bank until specifically requested by the physician. Ensure autologous and/or directed donor units <u>are transfused</u> before issuing allogeneic units. Follow the same order of issue when units are released for transfusion on nursing units.
- 5. Crossover Autologous units are reserved for the patient until expiration. No autologous units are "crossed-over" or released for allogeneic use. Units not transfused are discarded in biohazard waste. Directed donations are reserved for the designated patient unless released by the attending physician. Discard expired units in biohazard waste. Discard units in BBIS with disposition reason code EXPIRED.
- 6. *Billing* Special Autologous donor charges are billed to the patient if the units are not transfused. Regular charges are billed for crossmatches and for products transfused.

Approved by:		Review/Revision Date:
/s/ Lauren Stanoszek, M.D. Assistant Professor Director, Blood Transfusion Service	03/21/2023 Date	6/92 03/22/2011 1/98 03/01/2013 3/99 3/2/2015 11/99 3/1/2017 2/05 3/1/2019 2/07 3/1/2021 6/9/2008 3/20/2023
/s/ Christine Stesney-Ridenour Chief Operating Officer - UTMC	03/21/2023	-
Review/Revision Completed By: Danielle Weilnau, MLS(ASCP) ^{CM}		Next Review Date: 3/1/2025

Reference:

AABB Standards for Blood Banks and Transfusion Services, current edition. <u>Technical Manual</u>, American Association of Blood Banks, current edition.