Name of Policy:	Critical Test Limits in the Blood Transfusion Service	THE UNIVERSITY OF TOLEDO
Policy Number:	3364-108-307	
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:03/20/2023Initial Effective Date:7/1995
New polic Major revi	y proposal Minor/technical rev sion of existing policy X Reaffirmation of ex	vision of existing policy isting policy

(A) Policy Statement

The patient's licensed caregiver is notified by the Officer of the Day (O.D.) or the BTS Medical Director when results indicating possible life-threatening or detrimental effects to patients are obtained.

(B) Purpose of Policy

To provide communication necessary to initiate prompt and appropriate patient care management.

(C) Procedure

When the following results are obtained in the course of patient testing, notify the O.D. or BTS Medical Director immediately. Document the time of notification and M.D. notified on the appropriate worksheet or report The O.D. or BTS Medical Director notifies and consults with the patient's attending physician to provide prompt and appropriate patient treatment.

- Positive results in preliminary investigation of adverse reaction to Blood Transfusion including discrepancy in ABO/Rh type, clerical verification, hemolyzed serum or positive direct antiglobulin test when pretransfusion test repeats as negative.
- Positive Gram stain results on donor blood in investigation of adverse reaction to Blood Transfusion.
- Subsequent incompatible crossmatch results or positive antibody screen results when blood is transfused prior to completion of compatibility testing due to patient condition and urgent need.
- Excessive delay (over two hours) in blood availability due to presence of blood group antibodies or low blood inventory levels.
- MTP on recipient with compatibility problems or when notified of ARC blood supply limitations
- ARC Recall or other notification of positive testing results on a blood product issued for imminent transfusion. See 3364-108-207.

Approved by:		Review/Revision Date:
		6/96 3/1/2021
		2/99 3/20/2023
/s/	03/21/2023	3/02
Lauren Stanoszek, M.D.	Date	1/05
Assistant Professor		1/2008
Director, Blood Transfusion Service		6/9/2008
		3/22/2011
		3/01/2013
/s/	03/21/2023	3/2/2015
Christine Stesney-Ridenour	Date	3/1/2017
Chief Operating Officer - UTMC		3/1/2019
Review/Revision Completed By:		
Danielle Weilnau, MLS(ASCP) ^{CM}		Next Review Date: 3/1/2025

Reference: College of American Pathologists, Laboratory Accreditation Program, Inspection Checklist,