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| <b>DATE:</b> | 10 April 2023  |
| <b>TO:</b>   | All Staff at Connect Care Launch 6 Sites   |
| <b>FROM:</b> | Dr. Susan Nahirniak, Alberta Precision Labs (APL) Transfusion & Transplantation Medicine Program (TTM) |
| <b>RE:</b>   | <b>Transfusion Medicine Reminders for Launch 6</b>   |

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## PLEASE POST OR DISTRIBUTE AS WIDELY AS APPROPRIATE

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### Key Message

Although there are many transfusion medicine related resources available in the Connect Care Blood Administration Guide on the Learning Home Dashboard as well as in Knowledge Library and Training Course materials, this is a quick reference of correct processes that were found to be areas of concern with previous launches.

### 1) Transfusion Testing and Component/Product requests

- A current Type and Screen is required to access crossmatched red blood cells. There are three parts to a routine order for red cells.
  - 1) Type and Screen = serologic testing which includes three elements when complete (ABO/Rh blood group, the antibody screen and the type and screen expiry date).
  - 2) Prepare order = communicates to transfusion medicine the details of the components/ products needed.
  - 3) Transfuse order = administration order.
- Transfuse emergent orders – are intended for the documentation of the administration of transfusion and will not generate an order in Transfusion Medicine. All Transfuse emergent orders must be accompanied by a phone call to replace the prepare order. The attestation workflow will be required if the request is for uncrossmatched blood.
- Platelets, plasma, and plasma protein products / derivatives do not require type and screens (i.e. no TSIN band required) to be collected but do need to have an ABO Rh on file for that patient.
  - Platelets and plasma – complete a Prepare and Transfuse Order and release the order from the Blood Administration workflow.
  - Plasma Protein products / Derivatives – complete a Prepare order and release the order from the Worklist tab.

Consistent with historical practice, a wristband with a transfusion service identification number (TSIN) **must** be placed on the patient at the time of collection. The TSIN form is not replaced by Connect Care orders.

When collecting a Type and Screen, three labels will print. Place one on the TSIN form in the collection record section and place the additional specimen labels on the TSIN tube labels and apply to the specimen tubes (two tubes recommended). Each tube requires the TSIN number.

The collection process requires a two-step identification of the patient.

- In fully launched sites, the Rover device scanning of the patient ID barcode can be used as one identifier for positive patient ID if the labels are printed at bedside, the collector identification must also be recorded.



- If Rover is not used, the person identifying the patient must be different than the person collecting the sample. 2 different names or identification numbers are required on the TSIN card. Checking the Patient Self check box indicates the person has identified themselves verbally.

The completed TSIN form must be submitted to the Transfusion Medicine lab with the specimen. If specimen labelling or the TSIN form documentation is incomplete or incorrect, it will be automatically rejected and will require recollection – no exceptions.

## **2) Patient Transfers**

If your patient has been transferred to another location from or to another Connect Care live site, double check to see whether there is an in-date Type and Screen with the same associated information as the patient identification armband and TSIN band. A new Type and Screen does not need to be collected if the information matches. Call the Transfusion Medicine laboratory if there is uncertainty before removal of the TSIN band and recollection.

## **3) Communicating with Transfusion Medicine**

The WellSky system used by Transfusion Medicine does not allow for searching of patients using their EPIC preferred name. For requests or queries, the legal name, pMRN or ULI of the patient must be provided.

## **4) Transfusion Tags**

All completed Transfusion tags must be retained following administration.

- If there is no transfusion reaction, remove the Transfusion Tag from the component / product /derivative and affix to the Transfusion Tag Mounting record.
- This record must be document scanned into the patient's chart using the Media Manager under "Blood Administration Tags".
- If there is a transfusion reaction, the tag should be left on the bag or box and returned to Transfusion Medicine, with the remaining products, the printed Blood Flowsheet and transfusion reaction specimen.

## **5) Blood Bank "forms"**

If the ordering of blood components / products or derivatives is occurring within the Connect Care system, the completion and submission of historical Central Zone, Edmonton Zone or Calgary Zone request forms for plasma, IVIG or prothrombin complex concentrate are not required.

### **Please direct questions or concerns to**

- Nicole Gettle for Calgary Zone ([Nicole.Gettle@albertaprecisionlabs.ca](mailto:Nicole.Gettle@albertaprecisionlabs.ca))
- Carole Ann LaGrange for Central Zone([CaroleAnn.LaGrange@albertaprecisionlabs.ca](mailto:CaroleAnn.LaGrange@albertaprecisionlabs.ca))
- Tihiro Rymer for Edmonton Zone ([Tihiro.Rymer@albertaprecisionlabs.ca](mailto:Tihiro.Rymer@albertaprecisionlabs.ca) )

### **Approved by**

- Dr. Susan Nahirniak, Medical Director, APL Transfusion & Transplantation Medicine