



e-Network Forum

CALIFORNIA BLOOD BANK SOCIETY

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Are two people needed to verify that the correct blood products are issued and transfused?

A member asked if there was an accreditation requirement or governmental regulation that required a Transfusion Service to utilize a second person in order to verify that a correct unit of blood product is about to be distributed (issued) for transfusion. The AABB Standards merely state: **J1.200** There shall be a mechanism to identify the intended recipient and requested blood component at the time of issue. (**Editor's note added 4-22-02:** The 20th and 21st editions of the AABB Standards suggest that the blood bank or transfusion service have a process to confirm agreement of the identifying information, the records, blood or component, and the request and that discrepancies be resolved before issue. The e-Network is referred to the actual documents for exact wording.) The inquiring member's institution utilizes only one person to verify a patient's name and ID at the time they distributed (issue) the blood product, using the information provided by the patient care floor and the unit tag and the bag label as the product is 'issued' in the computer. Similarly, the inquiring member asked if there was an accreditation requirement or governmental regulation that required two individuals perform the clerical cross checking just before administering a blood product to a patient. The AABB Standards merely state: **J6.000 IDENTIFICATION OF RECIPIENT** There shall be positive identification of the recipient and the blood container. **J6.100** Immediately before transfusion, the transfusionist shall verify that all information identifying the container with the intended recipient has been matched in the presence of the recipient, item by item. Records shall be maintained. **J6.200** All identification attached to the container shall remain attached at least until the transfusion has been terminated. (**Editor's note added 4-22-02:** The e-network is referred to the wording as it appears in the AABB Standards of the 20th and 21st editions.) This member's institution uses a two-person verification at the patient's bedside that the correct unit of blood product is about to be transfused. Finally, the inquiring member asked how Transfusion Services verify that the blood products they distributed (issue) are actually transfused (as opposed to being dumped into the biohazardous waste), and if in fact they are transfused, how do Transfusion Services verify they were given to the correct patient? The inquiring member's institution assumes that a blood product was transfused to the intended recipient if that product does not get returned to the blood bank.

Surprisingly, only two members responded initially to the above set of questions (May 16, 2001). Here is what those members had to say:

1. "At our two main hospitals for a major academic center, one a University Medical Center and the other a large country hospital and level one trauma center, **two individuals are required** for identification **prior to transfusion** of any blood component to the patient. This may include any combination of physicians, RNs, ARNPs or PAs. The second individual can be a medical student. We do not require two individuals to check the identification before the component leaves the blood bank and I do not believe there is any regulation requiring either of these. I am aware that many other institutions in our community do not require two health care providers for transfusion. The blood bank assumes that units that are not returned are administered however there is a system to check administration should look back be required."

Since the second member's reply arrived late, it is an **ADDENDUM** May 17, 2001

2. We actually wish to ask a similar question of CBBS members because of a concern from our surgical staff about the two-person check prior to administration in the O.R. Even though the regulation/standards do not require a two-person check at issue or prior to administration, **we require a "two-person check"** as part of our Issue and Blood Admin SOPs. This is our institution's choice because of our quality review process that identified "unusual occurrence" trends with issuing and blood administration.

ADDENDUM April 22, 2002

3. At a **Canadian blood banker's hospital** it is reported that they use a **simple card tag** which is attached to each blood product. In addition to showing all the details of the patient and blood product, the tag has **signature spaces for the two RN's** that identify the patient to be

transfused. The signed tags have to be **returned** to the laboratory once the transfusion has finished and they are kept on file. The Canadian blood banker reports that not only does this give them signed documentation of the staff at the bedside, but it also tells them that the unit has been given, so they do not have to assume it.

Please submit comments to the [e-Network Forum](#).



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Addenda: May 23, 2001; April 22, 2002

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