I. TITLE:

Verification of Physician Order for Blood Component

II. PRINCIPLE:

The Transfusion Service has the responsibility to ensure the patient receives the correct component ordered by the physician. According to current AABB Standards, the request for blood must be confirmed before issue of the component. Serious patient harm can be caused if the wrong component type is transfused. This policy initiates a process by which the original physician order is reviewed by the Transfusion Service and compared to the order entered in the hospital computer system. The order to prepare a blood component and order to transfuse the product could be written at different times, so both orders are reviewed. The Transfusion Service cannot take verbal orders.

III. REAGENTS, SPECIAL SUPPLIES & EQUIPMENT:

NA

IV. CALIBRATION:

NA

V. QUALITY CONTROL:

NA

VI. PROCEDURE:


B. The Form is available in Forms Fast under “Physician Order” tab.
   1. Form #270005 is for Adult patients
   2. Form #270009 is for Neonates and Pediatric patients
   3. Manual forms can be used during downtime. Information must be legible with the patient’s first and last name, medical record number, and location.
   4. Each time the physician adds to the order or changes it, a new form will be used.

C. A copy of the original physician order for a blood component will be sent to the Transfusion Service at the same time the order is entered in the hospital computer system.
   1. The copy can be faxed (244-5211), sent via the pneumatic tube system, or hand-carried to the Transfusion Service.
   2. The Nursing staff will order the tests and/or component(s) in the hospital computer system.

D. Review of the physician written order by the Transfusion Service
   1. The technologist processing the order is responsible for ensuring the order in the computer matches the physician order.
      a. If the physician order does not match the order entered in the computer, notify the Nursing unit immediately. They will cancel the wrong order and order the correct product in the computer system.
Document in hospital error reporting system or notify the Blood Bank supervisor.

b. If the written physician order is illegible, contact the RN in charge of the patient and have them contact the physician for clarification. The RN will send a new legible order. It is acceptable to have the RN re-write the order, if necessary, as long as they date/initial the correction.

c. The technologist processing the order is responsible for entering any special patient requirements in the Transfusion Service computer system.

2. When the order is completed:
   a. Orders for T&S are stapled with the collection form and put in the T&S box for retrieval later if components are ordered later.
   b. Order for crossmatch or components is put with the 1st unit. At issue, the order will be filed in the current day’s Issue folder. Orders are kept on file for 1 month in the Transfusion Service, then stored offsite.
      i. Physician orders which do not result in transfusion at the end of 3 days are discarded.
E. At Issue of Blood Component

1. The Nursing staff will bring the **original** order at time of pick up. The order may be sent via the pneumatic tube station, as well.
   i. If Nursing cannot locate the original order:
      1. Retrieve the Blood Bank copy and make a 2\textsuperscript{nd} copy for Nursing.
      2. Write at the top of the 2\textsuperscript{nd} copy: “COPY made date/time/your initials” and give to Nursing to replace the missing original order.
      3. Be sure to keep the 1\textsuperscript{st} copy for the Blood Bank.

2. Nursing staff will mark on the form which component and quantity is requested.
3. At issue, the Transfusion Service technologist will review the original order form and ensure the component ordered matches the component issued.

4. **ANY DISCREPANCY BETWEEN THE PHYSICIAN’S ORIGINAL ORDER AND THE SELECTED COMPONENT MUST BE RESOLVED BEFORE ISSUE.** Document any ordering errors in the hospital error reporting system for tracking purposes.

5. The Blood Bank technologist will also initial the “Components Picked Up” section with each issue.
6. The issue process is documented in the Blood Bank LIS per routine procedure.

VII. REFERENCES:

1. AABB Standards for Transfusion Services and Blood Banks, current edition
Example of Form:

**Physicians:**

**When do you want it?**

**Physicians:**

**What do you want?**

**Physicians:**

**Do you want to transfuse?**

**Physicians:**

We need to know who you are and how to contact you.

**Physicians:**

Does your patient require special blood?

**Nursing:**

Bring this order form every time to pick up blood.

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### Example of Form:

<table>
<thead>
<tr>
<th>Patient Name</th>
<th>Order Date</th>
<th>Blood Component</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2/18/2008</td>
<td></td>
</tr>
</tbody>
</table>

2/18/2008