Appendix L: ABO/RH Confirmation Test

Requirements for Routine Blood Bank Specimens (e.g. Type & Screen, ABO/Rh Confirmation, etc)

- Specimen label must include:
  Patient’s Full Name and Medical Record Number
  Date of Collection
  Legible Name of the Phlebotomist or 5-digit physician ID (Initials are NOT accepted)

- A paper requisition is required. Requisition can be printed from APEX. The paper Blood Bank requisition form is also acceptable.
  (Exception: sample was collected using CareFusion or other Specimen Verification System)

Sample Volume and Tube type:

<table>
<thead>
<tr>
<th>Blood Bank Test</th>
<th>Patient Age</th>
<th>Preferred Volume (EDTA = purple top)</th>
<th>Minimum volume (EDTA = purple top)*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Type and Screen (T&amp;S)</td>
<td></td>
<td>Full microtainer**</td>
<td>Full microtainer**</td>
</tr>
<tr>
<td>Infant &lt; 4 mo</td>
<td></td>
<td>1 mL</td>
<td>1 mL</td>
</tr>
<tr>
<td>Peds 4 mo - 1 yr</td>
<td></td>
<td>3 mL</td>
<td>3 mL</td>
</tr>
<tr>
<td>Peds 1-18 yrs &gt; 18 yrs</td>
<td></td>
<td>6 mL</td>
<td>5 mL</td>
</tr>
<tr>
<td>ABO/Rh Confirmation*</td>
<td>Infant &lt; 4 mo</td>
<td>Full microtainer**</td>
<td>Full microtainer**</td>
</tr>
<tr>
<td>Any patient &gt; 4 mo</td>
<td></td>
<td>3 mL</td>
<td>1 mL</td>
</tr>
</tbody>
</table>

*Additional sample may be required for antibody identification or further testing  
**A full microtainer = 0.8 mL
* An ABO/Rh Confirmation Test is required for patients without prior UCSF Blood Bank testing. See below

ABO/RH CONFIRMATION TEST: REQUIREMENTS AND WORKFLOW

1) Collection Requirements:
   - A SEPARATE PHLEBOTOMY MUST BE PERFORMED TO COLLECT THE ABO/RH CONFIRMATION SAMPLE (distinct from the collection of the first sample, e.g. T&S sample).
   - The ABO/Rh Confirmation sample should NOT be drawn at the same time as the initial sample drawn for the Type & Screen (or ABO/Rh type).
   - This test is a regulatory requirement to reduce the risk of transfusion errors from mislabeling of samples. It is a one-time requirement for ALL patients. It is NOT required every time a sample is sent to the Blood Bank.

2) Specimen Requirements:
   - Include TIME OF DRAW on tube in addition to the requirements highlighted green above.
   - A SEPARATE REQUISITION is required for the ABO/Rh Confirmation Sample.

3) APEX work flow for drawing the ABO/Rh Confirmation Sample: Inpatients only
   - **Step 1:** Verify that the ordered ABO/Rh Confirmation Test is required. It is required only if:
     - In Results Review under “Blood Types and Products”, there is an “ABO/Rh Confirmation Required” result answered as “YES” or
     - There is no prior ABO/Rh result documented in APEX (after 7/1/2006).
   - **Step 2:** CALL BLOOD BANK (3-1313) TO RELEASE THE ABO/RH CONFIRMATION TEST
     - After release, the Blood Bank notifies the patient’s nurse and the sample can then be collected. The sample must be collected via a SEPARATE PHLEBOTOMY.

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BLOOD AND BLOOD COMPONENTS ADMINISTRATION (GENERAL) (continued)

- Nursing should not "Release" an ABO/Rh Confirmation Test order in APEX. This test does not display in the Nursing Kardex for most nursing units. Nursing is not permitted to adopt workarounds in APEX to release this test.

- In exceptional cases when the above protocol is not followed, the Blood Bank will contact the patient's nurse to obtain a verbal attestation of sample collection via separate phlebotomy. RN's name will be documented in the patient's electronic medical record.

4) BEST PRACTICE WHEN TRANSFUSION IS NOT ANTICIPATED SOON

If Provider has ordered a Type and Screen and an ABO/Rh Confirmation Test but transfusion is NOT anticipated before the next scheduled blood draw, best practice is to:
- Collect the Type and Screen first (soon after the order is placed)
- Collect the ABO/Rh Confirmation Test with the NEXT planned blood draw

5) RARE EXCEPTIONS TO THE SEPARATE PHLEBOTOMY RULE – USE OF ATTESTATION CARD

- The PINK ATTESTATION CARD (inpatient floors) requires that TWO NURSES be present at the bedside when the ABO/Rh Confirmation Sample is drawn/labeled.
  - Nurse #1 collects and labels the Type and Screen and ABO/Rh Confirmation Sample
  - Nurse #2 completes and the Attestation Card (see below)

![UCSF Medical Center Attestation Card](image)

- The Attestation Card and a Requisition must be sent WITH the specimens.

NOTE: Use of the Pink Attestation Card (for exceptions to the separate phlebotomy rule) should be LIMITED. All Attestation Cards will be audited/reviewed by the hospital’s transfusion committee to monitor for appropriateness of use.

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THE FOLLOWING APPLIES TO OR PATIENTS ONLY:

1) BEST PRACTICE WHEN A TYPE & SCREEN SAMPLE AND ABO/RH CONFIRMATION SAMPLE ARE REQUIRED FOR AN OR PATIENT:
   - Collect the Type and Screen sample in the Pre-Operative area
   - Collect the ABO/Rh Confirmation sample in the OR

2) USE OF YELLOW ATTESTATION CARD BY THE OR (form # 500-0450):
   - Required when specimens for both the Type & Screen and ABO/Rh Confirmation are drawn at the same time in the OR from a line.
   - The YELLOW ATTESTATION CARD (for OR ONLY) requires that TWO licensed professionals be present when the ABO/Rh Confirmation Sample is drawn.
     - Anesthesiologist: Collects the Type & Screen and ABO/Rh Confirmation Sample
     - 2nd licensed professional: Completes and signs the Attestation Card (below)

   ![Attestation Card - ABO/Rh Confirmation Sample](image)

   - The Attestation Card and a Requisition must be sent WITH the specimens.

   **NOTE:** Use of the Yellow Attestation Card should be LIMITED. All Attestation Cards will be audited/reviewed by the hospital's transfusion committee to monitor for appropriateness of use.

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