

**DRAFT**

## **Standard Operating Procedure for Labeling by Nursing Staff**

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### **Principle:**

Labeling of blood units is a three-step process. The first step, performed by the nursing staff, involves the appropriate labeling of the primary collection bag. The second step, performed by the laboratory staff, occurs after the blood is tested, and involves (among other processes) demonstrating the ABO/Rh type of the donor and the expiration dates of the components made from the whole blood unit. Finally, the third step, also performed by the laboratory staff, is done when the blood is ordered for transfusion. It involves recording such data as the name of the intended transfusion recipient, the results of the crossmatch test, etc..

All labeling steps must be performed with precise attention to detail. Mixing up two or more units with one another potentially can lead to a patient dying from an ABO-incompatible transfusion reaction. This SOP will focus on the first labeling step, described above.

### **Materials:**

1. Donor base labels
2. Unit number stickers
3. One red-top and one lavender-top glass tube—each 7 mL

### **Procedure:**

1. Immediately prior to collection of the donor's blood, place a *Donor base label* onto the primary collection bag that is to be utilized. Choices for Donor base labels are as follows:
  - a. "CPDA-1 WHOLE BLOOD"
  - b. "CPD WHOLE BLOOD" (for when additive solution is to be used)
2. A Unit number sticker then is attached on top of the donor base label. Care must be taken to ensure that this unit number has never been used before by JMC's Blood Bank
3. Next, the collection date is handwritten onto the donor base label
4. And, finally, unit number stickers are attached to the collection tubes, which are attached (with rubber bands) to the secondary collection bags
5. At this time, the blood bags are ready for the blood collection process (see "*Whole Blood Collection SOP*" for further details)

### **Reference:**

AABB *Technical Manual*, 12<sup>th</sup> ed., pp 150-151