

Diagnostics Directorate, South Glasgow

Department of Haematology

File reference: SG-MPOL-033

Version: 1.3 (10th Sep 2021)

Access to blood and blood products at Victoria ACH

1. 'Routine' Service

There is no blood bank on site – this means no blood can be crossmatched or blood products issued from the ACH site.

There will be 3 units of O Rh D negative blood and 3 units of O Rh D Positive blood kept in the blood fridge (Clinic P second floor) ACH.

Any planned medical day unit/renal unit transfusions will be arranged via QEUH lab and blood kept in blood fridge. No allocated units are kept in this fridge overnight. MLAs check at 3pm each day and requests for unused blood to be returned to QEUH if not being used.

2. Patient selection for surgery

It is essential to identify patients appropriate for surgery at the ACH in relation to their surgical, anaesthetic and laboratory/blood product support requirements. Patients who are at increased likelihood of needing blood/blood product support, or for whom it will prove difficult getting blood products should not be scheduled for Victoria ACH. This includes

- Patients with a known bleeding diathesis (e.g. dysfibrinoginaemia, von Willebrands disease, Haemophilia, platelet function disorder).
- Patients with significant thrombocytopenia
- Patients who require a 'group and retain' as per MSBOS with a positive red cell antibody screen.
- Patients undergoing an operation where blood is likely to be needed.

It is recognised that every operation has a risk of bleeding, and that it will occasionally occur. For the operations in which this is most likely, the patients will have had a pre-op group and retain sample taken. This will enable the QEUH lab to issue group/matched blood as quickly as possible. In order to achieve this

- All 'Group and Save' samples for pre-op patients MUST be processed at QEUH lab (i.e. Irrespective of where the patient has their pre-op assessment, their 'group and retain' sample must be processed at QEUH – the clear documentation of this on the form should ensure that this happens)
- All Group and Save samples must be taken within 14 days of the operation (assuming no blood products transfused in preceding 3 months – shorter time period as per transfusion policy if patient has been transfused)
- All Group and Save samples must have planned date of operation stated on the request form – if date changes, it is the responsibility of the clinical team to inform blood bank at QEUH and ensure sample still available/usable.
- All Group and Save samples must have a negative antibody screen if not this must be discussed with Blood Bank pre-op as patients with

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positive antibody screens are not suitable for surgery at the ACH. The only exception to this are TOPs.

3. Access to emergency blood products at Victoria ACH

It is anticipated that with appropriate patient selection, this will be a rare event. There are 3 separate time periods, when a patient may bleed

- A. 9-5 Mon-Fri when the building and lab is fully open and all theatre staff available
- B. After 5pm, but when theatre staff are still present and the clinical team consider it best for the patient that they are taken back/continue in theatre in the ACH
- C. Out of hours when theatres closed and no theatre or lab staff on site.

The most effective way to deliver blood products to the patient will depend on what time period the event is taking place. The procedure is as follows:

A. Bleeding during normal working hours

- Clinical staff recognise that blood/blood products will be required.
- 3 units of O Rh D negative blood and 3 units of O Rh D Positive blood will be available from ACH blood fridge – if these are used please inform Blood Bank at QEUH immediately to enable stock to be replenished.
- Major Haemorrhage Protocol to be activated
- Haematology lab staff at ACH and QEUH and on call haematology registrar are informed of patient, location and clinical situation. (The details of how to activate the major haemorrhage protocol are in separate document)
- Clinical team request blood and blood products via Trackcare which will print out in the lab at QEUH and the lab MUST be phoned to ensure receipt of the request.
- QEUH lab staff crossmatch and issue blood, FFP and platelets as required (Platelets issued from QEUH)
- Blood/blood products taxied to ACH
- Blood and products delivered to lab at VACH if 9am-5pm Monday to Friday and to theatre if outwith these hours (Taxi driver will be escorted by porter – porters ext 68333)
- Emergency FBC/Coag can be analysed at ACH lab.
- Additional Crossmatch samples if required will need to be sent urgently to QEUH – via emergency taxi
- Once patient stabilised, they should be transferred to the most appropriate major hospital (likely QEUH – though may be some reason to go elsewhere – clinical decision)

B. Bleeding after 5pm, but theatre operational

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In the event of a patient being in recovery when they start to bleed, it may be decided that it is most appropriate for them to be managed back in theatre in the ACH prior to transfer. Process is similar as above except

- Haem lab staff at QEUH and on call QEUH middle grade haematologist (registrar via on call rota not page as out of hours) are informed of patient, location and clinical situation (No one at Victoria ACH lab)
- All emergency samples from patient will be analysed at QEUH lab samples will have to be sent via taxi (collection point at porter's office)

C. Out of hours bleeding, no theatre staff on site.

- Only blood available will be the 3 units of O Rh D negative blood and 3 units of O Rh D Positive blood in the ACH blood fridge – access to building via security guard
- Emergency transfer to appropriate hospital should be arranged without delay (likely to be 999 ambulance).
- Clinical staff should inform blood bank at QEUH that patient is being transferred

Key points to be highlighted

- No blood bank on site.
- All 'group and save' samples for patients at Victoria ACH must be sent to QEUH for analysis and storage and have a date for operation
- The appropriate selection of patients is essential to minimise the need for blood products
- ACH blood fridge will be situated in Clinic P anyone potentially requiring access to the emergency blood stock units will need to have their badge activated to open the ward door.
- Anyone accessing the Blood Fridge must have a Blood Track barcode and must have up to date blood track training. There is no emergency access button on the fridge as only trained staff can collect blood.
- Taxi drivers will deliver blood and blood products to portering staff out of hours and they will deliver to theatre or fridge as appropriate.
- Major haemorrhage protocol should be activated as soon as major haemorrhage suspected.
- Out of hours we cannot support a major haemorrhage on site unless theatre operational.

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