1. **PRINCIPLE:**

A visual assessment to confirm blood components are free of contamination, hemolysis or particulate is performed by the person prior to receiving into inventory, issuing or shipping blood components and/or plasma protein and related products(PPRP).

**2.0 PURPOSE:**

To ensure blood components and PPRP that are received, issued, or shipped are suitable and safe for transfusion.

1. **RELEVANT REQUIREMENTS:**
   1. Blood components and PPRP shall be inspected for abnormal appearance upon receipt, immediately before issuing and immediately before packing for transportation by the transfusion service. The visual inspection shall be documented. Blood components and PPRP not passing inspection shall be quarantined until appropriate disposition is determined and the blood supplier or shipping facility informed.10.1
   2. Blood components modified in an “open system” in the hospital TS must have the expiry time recorded on/attached to, the product container at the time of preparation.10.1
2. **RELATED POLICIES/PROCEDURES (POLICIES IN OTTRM):** 
   1. [IM.005 – Final Disposition of Blood Components and Plasma Protein and Related Products Not Suitable for Transfusion – Manual Procedure](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Ftransfusionontario.org%2Fwp-content%2Fuploads%2F2020%2F07%2FIM.005-Final-Disposition-of-Blood-Blood-Components-and-Other-Related-Products-Not-Suitable-for-Transfusion-Manual-Procedure.docx&wdOrigin=BROWSELINK)
   2. [CSP.001 – Selection of Blood Components for Transfusion](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Ftransfusionontario.org%2Fwp-content%2Fuploads%2F2020%2F08%2FCSP.001-Selection-of-Blood-Components-for-Transfusion.docx&wdOrigin=BROWSELINK)
   3. [QCA.020 – Medical Director Consultation Protocol](https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Ftransfusionontario.org%2Fwp-content%2Fuploads%2F2020%2F06%2FQCA.020-Medical-Director-Consultation-Protocol-final.docx&wdOrigin=BROWSELINK)
3. **MATERIALS:**
4. **Specimens: N/A**
5. **Equipment: N/A**
6. **Reagents: N/A**
7. **Supplies / Related Forms:**

Blood products to be inspected

CBS Hospital Voucher (if applicable)

#### IM.006F1- Inter-Hospital Redistribution Form (if applicable)

#### IM.007F1-Inter-Hospital Transfer Form Blood Components Products Accompanying a Patient (if applicable)

1. **QUALITY CONTROL**: N/A
2. **PROCEDURE:**

|  |  |
| --- | --- |
| **STEP** | **ACTION** |
| * 1. Determine if the product is in date. | * + 1. Verify the expiry date on the product label.  |  |  | | --- | --- | | **If** | **Then** | | Product is expired/ No expiry date on the label | * Discard the unit or PPRP. See IM.005 – Final Disposition of Blood Components and Plasma Protein and Related Products Not Suitable for Transfusion – Manual Procedure. * Notify the sending hospital or the blood supplier. If applicable   + Initiate a customer feedback form online for shipments received from the blood supplier * Follow your hospital specific process for initiating an incident investigation. | | No expiry date on the label of modified products | * Determine if an expiry label was required by checking with the technologist who performed the component preparation.  |  |  | | --- | --- | | **If** | **Then** | | Adjusted expiry label placement was missed | * A new expiry date and time label must be attached to the product container * Follow your hospital specific process for initiating an incident investigation. | | |
| * 1. Visually inspect the blood component or PPRP | * + 1. Confirm that all ports on the blood components or sterility seal on the PPRP are intact.  |  |  | | --- | --- | | **If** | **Then** | | None of the ports are intact or the seal is broken | * Discard the unit or PPRP. See IM.005 – Final Disposition of Blood Components and Plasma Protein and Related Products Not Suitable for Transfusion – Manual Procedure. * Notify the sending hospital or the blood supplier if applicable.   + Initiate a customer feedback form online for shipments received from the blood supplier. * Follow your hospital specific process for initiating an incident investigation. | | Component has been modified | * At least one original port with cover must be intact |  * + 1. Inspect for discoloration, particulate matter, and size.  |  |  | | --- | --- | | Component /Product | Expected Visual Appearance | |  | ***RED CELL MASS***   * Normal variation in shade of red   + Bright red may indicate Arterial blood. The TS Medical Director or designate must authorize the release of the product. This authorization must be documented. See procedural note 9.1 * Devoid of clots, fibrin strands and cellular aggregates | | ***RED CELL SUPERNATANT***   * Straw coloured * Translucent | |  | ***Platelets***   * Varying colour from beige to yellow * Opaque * Residual red cells in platelet units may confer a salmon/pink colour. * Devoid of clots, fibrin strands and cellular aggregates | |  | ***PLASMA***   * Varying colour from beige to yellow * Opaque * Residual red cells in plasma units may confer a salmon/pink. * Devoid of clots, fibrin strands and cellular aggregates * If receiving frozen plasma, ensure that the unit is still in frozen state and that the unit is still intact. | | Gamunex-C: Uses and Side Effects | AmeriPharma Specialty | ***Plasma Protein and Related Products***   * Refer to manufacturer’s product insert for acceptable appearance. |  |  |  | | --- | --- | | **If** | **Then** | | Any deviation from visual appears is present | Refer to the Canadian Blood Services Visual Assessment Guide  <https://professionaleducation.blood.ca/sites/default/files/VAG_en.pdf>   * See procedural note 9.2 * Notify the sending hospital or the blood supplier.   + Initiate a customer feedback form online for shipments received from the blood supplier. * Follow your hospital specific process for initiating an incident investigation. * The TS Medical Director or designate must authorize the release of the product that may fail visual inspection but are deemed transfusable. This authorization must be documented. * Discard if instructed. See IM.005 – Final Disposition of Blood Components and Plasma Protein and Related Products Not Suitable for Transfusion – Manual Procedure. | | Received frozen plasma partially thawed | * Adjust expiry date. * Store as thawed plasma. |  * + - * 1. Inspect the RBC unit’s size.  |  |  | | --- | --- | | **If** | **Then** | | The unit appears small and there is no visible supernatant on the RBC unit. | * The additive solution may not have been added. * Discard the unit. See IM.005 – Final Disposition of Blood Components and Plasma Protein and Related Products Not Suitable for Transfusion – Manual Procedure. * Notify the sending hospital or the blood supplier.   + Initiate a customer feedback form online for shipments received from the blood supplier. * Follow your hospital specific process for initiating an incident investigation. | |
| 1. Document the results of the visual inspection. | * + 1. Document the results of the visual inspection in your LIS or manual method. Follow your site’s specific process for documenting the visual inspection. |

1. **REPORTING: N/A**
2. **PROCEDURE NOTES:**

9.1 Arterial blood donations do not result in harm to the recipient however the blood supplier should be informed if this is suspected to ensure appropriate donor follow up.10.5

* 1. Quarantine blood products not meeting visual inspection to ensure that they are not inadvertently used:
     1. Affix a note onto the unit(s) clearly stating “Quarantined – DO NOT USE”. Date and initial the note and record in LIS if applicable.
     2. Place the product(s) in an area of the fridge (or preferably in another blood product storage refrigerator) that is clearly separated from general inventory and assigned units.

**10.0 REFERENCES:**

* 1. CSTM Standards for Hospital Transfusion Services Version 5.1 – December 2022. Canadian Society for Transfusion Medicine, 5.1.1.5, 5.7.3.1, 5.6.1.3
  2. Canadian Standards Association Standards for Blood and Blood Components CANZ902-20. 9.5.2, 10.5.3
  3. Canadian Blood Services Visual Assessment Guide. January 2009 T05 021 [https://professionaleducation.blood.ca/en/transfusion/best-practices/visual-assessment-guide](https://professionaleducation.blood.ca/en/transfusion/best-practices/visual-assessment-guide%20)
  4. Cohn CS, ed. AABB Technical Manual, 20th ed. Bethesda, MD: American Association of Blood Banks, 2020: 153-154.
  5. Incidental arterial phlebotomy of a whole blood donor. Parsons J et al. Transfusion 2014;54:1220.

1. **REVISION HISTORY:**

|  |  |
| --- | --- |
| **Revision Date** | **Summary of Revision** |
| August 8, 2014 | * Revised name of manual * Revised sections 2.0 & 5.0 & 7.0 * Revised wording of section 6.3.1.2 * Revised wording of section 6.3.4 * Revised and renumbered section 8.0; added section 8.3 * Updated list of references to include most recent editions |
| June, 2023 | * Combined visual inspection for all product and refer to the Visual Assessment Guide for further information * Addition of policy statement * Addition of Related Policies * Updated list of references to include most recent editions |