Date: March 13, 2008

To: AABB Institutional Members

From: Thomas Price, MD
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Re: Errata Sheet for *Standards for Blood Banks and Transfusion Services,* 25th edition

Please note that the following errors have been identified in the *Standards for Blood Banks and Transfusion Services,* 25th edition.

1) Standard 5.1.6.5.2

When standard 5.1.6.5.2 was updated for consistency with other requirements surrounding the implementation of ISBT 128, the meaning of this standard was inadvertently changed. This standard attempts to capture a number of different scenarios, and the program unit recognized the challenge of presenting all of these scenarios in a single standard.

The intent of the program unit is that this standard should only be applied in situations where the intermediate shipping facility will re-label a modified product. With ISBT 128, routine re-labeling of units by intermediary facilities is only appropriate if the product is modified. It is important to note that the facility re-labeling a modified product must apply an ISBT 128 label if the unit was originally labeled in ISBT 128. A facility that cannot do so – for example, a facility that receives a product originally labeled in ISBT 128, modifies the product, and re-labels in Codabar - would need to request a variance.

As published, standard 5.1.6.5.2 appears to require that intermediate shipping facilities re-label all products received. This was not the intent of the program unit. If the intermediate facility wishes to use the label affixed by the collecting facility, it may do so. Standard 5.1.6.5.2 as published, and as corrected, appears below.

As published:

5.1.6.5.2 If a transfusing facility or other intermediate shipping facility receives a unit labeled with a Codabar Donation Identification Number, an ISBT 128 Donation Identification or Codabar Donation Identification Number shall be assigned. The label shall be affixed to the container and shall identify the facility assigning the identification. All other identification except that of the original collection facility shall be removed, obscured, or obliterated. This requirement does not preclude the use of a patient identification number.

As corrected:

5.1.6.5.2 If a transfusing facility or other intermediate shipping facility receives a unit labeled with a Codabar Donation Identification Number, an ISBT 128 Donation Identification or Codabar Donation Identification Number ~~shall~~ may be assigned. The label shall be affixed to the container and shall identify the facility assigning the identification. Any other donation identification number, except that of the original collection facility shall be removed, obscured, or obliterated. This requirement does not preclude the use of a patient identification number.

2) Reference Standard 6.2C

Item 26 in Reference Standard 6.2C was mistakenly printed with a ten year retention. In addition, the language addresses records that are very similar to those required by item 13. Item 26 should not have appeared in the final publication. Item 13 addresses monitoring of the temperature of refrigerators, freezers, and platelet incubators every 4 hours; item 27 addresses recording of the temperature every 4 hours when blood or components are stored in an open storage area. Therefore, item 26 should be deleted.

As published:
Reference Standard 6.2C – Retention of Other Records

13	3.6.2	Temperature of refrigerators, freezers, and platelet incubators recorded every 4 hours	5
26	5.1.8.1.2	Temperature of blood products shall be recorded every 4 hours	10
27	5.1.8.1.2.1	Ambient temperature recorded every 4 hours when components are stored in open storage area	5

As corrected:

13	3.6.2	Temperature of refrigerators, freezers, and platelet incubators recorded every 4 hours	5
~~26~~	~~5.1.8.1.2~~	~~Temperature of blood products shall be recorded every 4 hours~~	~~10~~
27	5.1.8.1.2.1	Ambient temperature recorded every 4 hours when components are stored in open storage area	5