APPENDIX F VISTA BLOOD BANK USER MANUAL INTENDED USES

Preface

Directions for Use

The Laboratory Planning and Implementation Guide Version 5.2 of the Laboratory software application provides detai instructions on implementation of the software application and file setups.

The Blood Bank User Manual Version 5.2 provides detailed information and specific examples of data entry for each option. This manual is targeted toward the end users of the software and explanations are geared to the medical technologist, Blood Bank supervisory and/or Blood Bank Medical Director.

The Release Notes and Implementation Guide for Patch LR*5.2*72 includes an itemized listing of the data dictionary, option, and functionality changes, as well as instructions for implementation. Since Release Notes usually include information on other modules in addition to Blood Bank, the sections applicable to Blood Bank are also documented in Appendix D of the Blood Bank User Manual.

In addition, all patch messages for the Blood Bank module are prepared in a standardized format and include directions for the Blood Bank staff as well as for the Laboratory Information Manager and/or Information Resource Management (IRM) staff.

Intended Uses

The intended uses for the **V***IST***A** Blood Bank Software V. 5.2 are detailed in the following sections by major function, (i.e. donor, inventory and patient). For each major function, a descriptive listing of the data elements for the file is provided, followed by a detailed listing of software limitations and a table of intended uses.

Direction For Use

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VISTA Laboratory Blood Bank Version 5.2 Software Intended Uses

Introduction

The delivery of quality healthcare services to eligible veterans is one of the primary missions of the Department of Veterans Affairs (DVA). Within the DVA, the Veterans Health Administration (VHA) operates the largest centrally directed electronic healthcare information system in the United States. The electronic information systems provide vital support to the delivery of healthcare to veterans at 173 Veterans Administration Medical Centers (VAMCs), 389 outpatient clinics, 131 nursing homes, and 39 domiciliaries.

In 1982, VHA committed to building an electronic healthcare architecture titled Veterans Health Information Systems and Architecture (**V***ISTA*), formerly Decentralized Hospital Computer Program (DHCP). The focus of the program was the implementation of software modules that were easily integrated into a complete electronic hospital information system. By 1990, VHA had upgraded computer capacity at all VAMCs, and is now implementing software on a national scale that supports integrated healthcare delivery. All VA facilities have been integrated for the past eight years with a digital communications network. Through enhancement of its data transport utility, Patient Data Exchange (PDX), VA healthcare facilities can exchange health summaries containing relevant clinical data across the VA network. As VHA evolves into a managed care organization, the information network capabilities will provide support for health plan business elements in all operational and patient care support areas.

In developing **V***IST***A** software, VHA established the following criteria for design and integration:

- Software applications that are standardized and able to be exported to all VAMCs.
- Technical integration through the use of a common database, programming standards and conventions, and data administration functions.
- Functional integration through utilities such as order entry/results reporting and flexible healthcare summaries.
- Standard data elements.
- Timely access to data.

- Equipment and software specifications that avoid dependence on a single vendor.
- A system that is easy to use for the information resources manager and the healthcare professional.
- System integrity and protection of data against loss and unauthorized change, access or disclosure.

Blood Banking involves many sophisticated analyses that, without automation/ computerization, can only be performed by highly skilled persons. The human ability to "look for things" is more flexible than a computer's; but the ability to be flexible and intelligently search for and analyze information starts to break down as the quantity of information becomes larger. Computers, however, can handle vast amounts of information without suffering any deleterious effects. Therefore, a sophisticated computer system allows the highly trained technical staff to devote more time and energy to those problems and sophisticated analyses that are not yet within the realm of a computer.

The goals of the VISTA Blood Bank software are to:

- Improve the safety of blood/blood component trapusion by decreasing the number and severity of errors, through retrieval of previous records, verification of present results, detection of inconsistencies in data, bar code entry of unit ID, ABO/Rh, etc., and computer assisted donor labeling.
- Improve the quality of patient care through evaluation of transfusion appropriateness flags for specific components, and evaluation of transfusion increments.
- Decrease the clerical workload through bar code entry of unit information, printing of transfusion requests, transfer of information to multiple records and preparation of labels for specimens and unit tags.
- Improve resource management through statistics by location, physician, and/or treating specialty, through access of information by other medical staff and by optimizing inventory control.

While the computerizing of any system can require changes in that system, this module has been designed to impose no substantive changes in the actual workflow. With the exception of the actual worksheets for recording tests results and interpretations, the majority paper documents will be replaced by the computer.

Hardware Sizing Model

Platform size and disk capacity was chosen based on internal VA sizing algorithms which measure the mission, size, and complexity of all VHA facilities. Hardware was initially distributed from a centralized purchase which provided DEC Alpha systems for the largest 108 facilities and Intel based PC systems for the remaining (at that time) 64 hospitals. Local facilities are authorized to accommodate local needs or to improve performance as required.

In 1982, the Department of Medicine and Surgery within the Department of Veterans Affairs developed a planning tool for estimating resource requirements for **V***ISTA*. The planning tool is called the "sizing model". The "sizing model" is composed of algorithms for each software application that use workload data to calculate resource requirements for the VAMCs. All VAMCs were assigned a "Class" status based on the first sizing model results. Class I facilities were considered to have the largest resource needs and Class V were considered to have the smallest. Computing equipment to support the CORE applications, including the Laboratory software application was distributed with respect to class status. At that time, the Laboratory software application did not include Blood Bank software.

Over the following years, the scope of *VISTA* grew. The CORE applications were enhanced and new applications were added (both clinical and administrative). A second sizing model was developed in 1986 applying the same principals used for the first sizing model. However, the first sizing model addressed five applications, the second sizing model covered thirty. The first sizing model took into account a dozen input variables, the second employed nearly two hundred workload indicators. Application specific algorithms were developed using input from software application developers, subject matter experts, and hospital system managers who were already supporting these applications in a production environment. Each application is addressed separately with a computed expression for processing power, disk storage, video terminal, and printer requirements. Therefore, site specific requirements can reflect the particular mix of applications relevant to each unique setting.

The sizing model results are in terms of central processing through-put units (TUs), disk capacity, terminal and printer requirements. For the model, the PDP 11/44 processors are used as the benchmark for comparisons. One TU may be considered as equivalent to one quarter of the processing power of four networked PDP 11/44 processors. Estimates indicated that twenty users simultaneously accessing the central processing unit would use one TU. The Alpha equipment currently in use has a capacity approximately twenty times greater than the PDPs.

Information was collected from a variety of sources, including Automated Management Information System (AMIS) workload reports. In order to verify the accuracy of the input data, each site was given the opportunity to review and correct its own data profile. Corrections were made based on site input including supporting documentation and certification by the facility Director.

Accuracy of the sizing model predictions has been confirmed for applications that are in current production use. The sizing model process is inherently dynamic, with progressive refinement resulting from increasing understanding, continual change resulting from events at each site, and periodic revision by the Capacity Management and Planning group at the San Francisco Chief Information Officer Field Office (CIOFO).

The sizing model was again updated in 1995. The use of bar code readers were optional at that time and not included in this model. This issue will be revisited based on the upcoming conversion from Codabar to ISBT Code 128, which has a significant impact on the length and complexity of the unit ID numbers.

- 1. Blood Bank Data
 - a) Total # crossmatches (taken from FY95 AMIS Segment H29)
 - b) Total # blood donors (taken from FY95 AMIS Segment H29)
 - c) Number of technicians working in the blood bank during the day

2. Blood Bank Equations

- a) Blood Bank through-put units (TU) ((CRTs + PRTs)/25) + (Crossmatches/200,000)
- b) Blood Bank Disk

Algorithm is based on # crossmatches and # donors. Each crossmatch test requires 2.5K of storage (considering both the BLOOD INVENTORY file (#65) and the LAB DATA file (#63)) and each blood donor requires 0.2K of storage. The result is divided by 1000 to indicate megabytes. A constant of 1MB is added.

c) Blood Bank CRTs

Algorithm is based on # crossmatches, # donors, and maximum # techs on duty in Blood Bank at one time

For sites with Blood Bank activity and less than 1800 donors, allow one CRT for every two techs, with a minimum of one CRT.

For sites with more than 1800 donors/year, an additional CRT is added.

NOTE: This is based on the type of data entry and the limitations detailed in Section IX Functional Requirements.

d) Blood Bank Printers Algorithm is based on the # crossmatches, with a minimum of one

NOTE: This assumes that Blood Bank is in close proximity to other laboratory sections and that label printers can be shared.

Since the Blood Bank software represents only one component of the much larger hospital system, hardware considerations must be viewed in context. Although a TU can be calculated for each facility based on an appropriate algorithm, the adequacy of this measure is better reflected in terms of response time and the availability of CRTs.

Number of Users

The number of users who can access the system simultaneously is controlled by the number of available CRTs. Since the Blood Bank software is part of an integrated hospital computer system involving over thirty software applications, the total number of CRTs and users is beyond the scope of control of Blood Bank or even the Pathology & Laboratory Medicine Service. However, the number of CRTs needed to support the Blood Bank software is provided by the sizing model as indicated above.

Response Time

The integrated system provides dynamic adjustments of resources that provide optimum response time to on-line users. Performance monitoring tools allow each individual site to monitor and review response time to provide less than two second average responses, with an optimum target of under one second for responses. System load is balanced to provide acceptable response for printing labels and reports for users.

Storage Capacity

VHA Directive 10-95-094, dated September 28, 1995, provides instructions for archiving and purging data to relieve current disk storage limitations. Health care facilities are instructed to ensure that the presence of historical data in the **V***IST***A** databases does not adversely impact the ability to store current patient and administrative data. Data elements not specifically detailed in this directive represent completed actions, are not otherwise subject to retention requirements and are considered purgeable after 90 days or the time established by the software. If disk storage limitations are particularly severe, period may be shortened on a case by case basis at the discretion of the Chief, Information Resources Management Service (IRM) and the Chiefs of the respective using Services, with the approval of the medical center Director. Data for blood donors, blood inventory, and patients are specifically detailed in this directive, and therefore, are not subject to routine purging.

As noted in the sizing model, it is possible to predict the amount of disk space required to support the Blood Bank software on an annual basis. The tools available as part of the Statistical Analysis of Global Growth software provide data such as number of entries, number of blocks currently in use, percent change in a single day, percent change in the last 28 days, etc. The tools may be used by the sites to assist in evaluating current and future needs.

A variety of options exist which provide purge and archive capabilities, some of which are in the main Laboratory software application and some of which are specific to the blood bank software. Each of these options is discussed below. In general, data for the BLOOD INVENTORY file (#65) and the BLOOD DONOR file (#65.5) can be printed and purged as detailed below. However, patient data that is stored in the LAB DATA file (#63) is maintained on-line permanently. A listing of the data elements for each of these files is included in Section IX Functional Requirements.

The Purge Old Orders and Accessions [LROC] option is an interactive manual purge of the old data in the ACCESSION file (#68) and LAB ORDER ENTRY file (#69.9) within the Laboratory software application. No patient test data is purged with this option. The amount of data retained is site definable via the Grace Period For Orders field (#15), in the LAB ORDER ENTRY file (#69.9). Access to this option requires a higher level of security and is generally restricted to the IRM staff. This purge includes orders for blood bank tests; however, this is included in the limitations detailed in Section IX Functional Requirements.

The Laboratory Archiving enhancement provided in patch LR*5.2*59 provide archiving capability for the WKLD DATA file (#64.1) and the LAB MONTHLY WORKLOADS file (#67.9). Since this global/file can grow quite large as it holds data on each test performed within the lab, archiving/purging is necessary to control its growth.

The VA FileManager Extract Tool is used to move data from the source file to a destination (archive) file. After the data has been copied to external media, the data can then be purged from the source file. A variety of reporting capabilities is available for the archived data; however, the data cannot be restored to the source file. This purge includes blood bank workload; however, this data is collected for purely administrative/ management purposes and has no relation to any safety critical functional requirements. The Purge Data Found in the Search [LR ARCHIVE PURGE] option is used to the source data is not included in this algorithm and site defined parameters. Blood bank data is not included in the archive/purge).

The Purge the Cumulative File [LRAC PURGE] option is used to purge entries in the CUMULATIVE file (#64.7) based on an algorithm and site defined parameters for the grace period. Patient lab test data is not removed is stored in the LAB DATA file (#63). Blood bank data is not included in this algorithm (i.e., only CH and MI subscript tests are included in the cumulative report). Blood bank test reports are generated via a separate option and data is pulled directly from the LAB DATA file (#63).

The Remove inappropriate transfusion requests [LRBLSRI] option is used to purge inappropriate transfusion requests which are identified and flagged based on site defined audit criteria. Access to this option requires a higher level of security than the majority of the blood bank options. This option should be run periodically as necessary, usually on a monthly basis. Before running the Remove inappropriate transfusion requests [LRBLSRI] option, sites should generate the Inappropriate Transfusion Requests Report [LRBLPRIT] option. The removal of the listing of the inappropriate requests does not affect actual component request information.

The Remove units with final disposition [LRBLSER] option is used to remove data from the BLOOD INVENTORY file (#65) when a final disposition has been entered. Prior to using this option, the Print units with final disposition [LRBLRUF] option **must** be executed. This option identifies those units which meet the criteria (i.e., a final disposition has been entered to provide a hard copy document of all data in the BLOOD INVENTORY file (#65) for each unit sorted by unit number which can be retained in accordance with record retention requirements). Removing units from the BLOOD INVENTORY file (#65) does not affect a patient's transfusion record. Access to the Remove units with final disposition [LRBLSER] option requires a higher level of security than the majority of the blood bank options. The frequency by which this option is used is determined by the site. However, based on the minimal amount of space used by the LRD global where the data for the BLOOD INVENTORY file (#65) is stored, adequate storage capacity exists to provide on-line storage for many years, though not necessarily indefinitely. On-line storage is preferable in order to expedite access to data in the event that a unit is identified through 'look back' procedures. If so desired, the growth of this global can be monitored by the IRM at the site on a regular basis.

The Remove ex-donors [LRBLDK] option is used to remove donors from the BLOOD DONOR file (#65.5). Prior to using this option sites **must** execute the Print ex-donor [LRBLDEX] option. The Print ex-donor [LRBLDEX] option will identify donors who meet the remove ex-donors criteria, (i.e., no donations since the date specified by the site and to provide a hard copy document of all data in File (#65.5) for each donor sorted by donor which can be retained in accordance with record retention requirements). Access to the Remove ex-donors [LRBLDK] option requires a higher level of security than the majority of the blood bank options.

The frequency with which this option is run is determined by the site; however, based on the minimal amount of space used by the LRE global where the data for File (#65.5) is stored, adequate storage capacity exists to provide on-line storage for many years, though not necessarily indefinitely. On-line storage is preferable in order to expedite access to data in the event that a donor is identified through 'look back' procedures. If so desired, the growth of this global can be monitored by the IRM at the site on a regular basis.

The Remove data change audits [LRBLAR] option is used to remove the entries on the audit trail which are created based on algorithms included in the software for tracking changes in specific data.

NOTE: See Section IX Functional Requirements for a detailed listing of the fields for the BLOOD DONOR file (#65.5), BLOOD INVENTORY file (#65), and LAB DATA file (#63).

In some cases, the algorithm is part of the routine and in some cases, it is part of the input template. The entries for the audit trail are stored in the LAB SECTION PRINT file (#69.2), Data Change Date field (#999) is stored by ACCESSION AREA. Recommendations are for the Print data change audits [LRBLAD] option to be run on a regular basis as part of the supervisory review. The frequency by which the entries on the audit trail are removed is determined by the site and should be related to the procedures for retaining the hard copies of the audit trail report and the record retention policy at the site. Access to this option requires a higher level of security than the majority of the blood bank options. Deletion of the entries on the audit trail does not affect the appearance of comments automatically generated regarding changes in verified data for the patient test results entered through the Enter test data [LRBLPET] option, including ABO, Rh, antibody screening and direct antiglobulin testing. On the Blood Bank Tests Report, the comments will still appear indicating both the new result and the original result even after the entry on the audit trail has been deleted.

A. Blood Donor Functions

1. BLOOD DONOR file (#65.5) Description of Data Elements

	Field	
	Help Prompt	
Field#	Description	Data Type (PM=Pattern Match)
.001	IDENTIFICATION NUMBER TYPE A WHOLE NUMBER BETWEEN 1 AND 999999 This is a unique number assigned to the number cannot be assigned to a new donor	NUMBER 9999 blood donor. An existing 5.
.01	NAME NAME MUST BE 3-30 CHARACTERS, NOT NUMERI Name of blood donor	FREE TEXT IC OR STARTING WITH PUNCTUATION
.02	SEX	SET `M' FOR MALE; `F' FOR FEMALE;
	This is the sex of the blood donor.	
.03	DOB	DATE (PM= Exact date (with month and day) required and echo the answer)
	This is the age of the donor. (Must be 1	17 years or older.)
.031	AGE This is the computed age of the donor. Algorithm: TODAY-DOB/365.25 (always 0 de	COMPUTED ecimal digits)
.04	APHERESIS CODE	SET `1' FOR YES; `2' FOR NO; `1' FOR yes; `2' FOR no;
	If donor is willing donate plasma, plate `YES'	elets, or leukocytes enter
.05	ABO GROUP	SET `A' FOR A; `B' FOR B; `O' FOR O; `AB' FOR AB;
	The ABO group of the donor is entered he	ere
.06 RH	TYPE SET	'POS' FOR POSITIVE;
	The RH type of the donor is entered here	NEG, FOR NEGATIVE;
.07	CUMULATIVE DONATIONS TYPE A WHOLE NUMBER BETWEEN 0 AND 999999 Total number of donation credits based of of donation.	NUMBER 99 on values assigned to each type

	Field Name	
	Help Prompt	
Field#	Description	Data Type
.08	TOTAL AWARDS TYPE A WHOLE NUMBER BETWEEN 1 AND 99999 Number of awards given based on 1 award (8 donation credits) donated	NUMBER
.085	GIVE NEW AWARD	SET `1' FOR YES;
	To acknowledge giving award delete entry	y by entering `@'
.09	DEMOG ENT/EDIT BY Person entering or editing donor demogra	POINTER TO NEW PERSON FILE(#200) aphic data
.1	PERMANENT DEFERRAL	SET `1' FOR YES; `0' FOR NO;
	If the donor is to be permanently exclud Donor should be permanently deferred as on donor history or test results.	ded from donation enter 'YES' a homologous blood donor based
.11	DATE REGISTERED/EDITED	DATE (PM= Exact date (with month and day) required, time allowed and echo the answer)
	DATE DONOR IS ENTERED/EDITED IN THE FILM This is the date the donor was registered	ed into this file.
.12	DEFERRAL ENTER/EDIT BY Person entering or editing permanent de	POINTER TO NEW PERSON FILE (#200) ferral of donor.
.13	SSN ANSWER MUST BE 9-10 CHARACTERS IN LENGTH This field contains the social security	FREE TEXT H number of the donor.
	NOTE: The entry for the FORUTH DEFAULT is SITE file (#69.9) controls whether this template.	for DONOR in the LABORATORY field is included in the input
.14	MILITARY RANK Answer must be 2-20 characters in length If this collection is being performed by donor is entered in this field.	FREE TEXT n. y a DOD site, the rank of the
	NOTE: The entry for the SECOND DEFAULT : SITE file (#69.9) controls whether this template.	for DONOR in the LABORATORY field is included in the input
.16	PERMANENT DEFERRAL DATE CHANGE	DATE (PM= Exact date (with month and day) required, time allowed and echo the answer)
	If the deferral date is adjusted, the da	ate is entered in this field.

	Field Name	
	Help Prompt	
Field#	Description	Data Type
1.1	ADDRESS LINE 1 ANSWER MUST BE 1-30 CHARACTERS IN LENGTH First line of donor address	FREE TEXT I
1.2	ADDRESS LINE 2 ANSWER MUST BE 1-30 CHARACTERS IN LENGTH Second line of donor address (if necessa	FREE TEXT H ary)
1.3	ADDRESS LINE 3 ANSWER MUST BE 1-30 CHARACTERS IN LENGTH Third line of donor address (if necessar	FREE TEXT H Cy)
1.4	CITY ANSWER MUST BE 1-30 CHARACTERS IN LENGTH City of donor	FREE TEXT I
1.5	STATE State of donor residence	POINTER TO STATE FILE (#5)
1.6	ZIP CODE ANSWER MUST BE 5-9 CHARACTERS IN LENGTH Zip code of donor	FREE TEXT
1.7	HOME PHONE ANSWER MUST BE 3-15 CHARACTERS IN LENGTH Home phone of donor	FREE TEXT I
1.8	WORK PHONE ANSWER MUST BE 3-15 CHARACTERS IN LENGTH Phone where donor works so that the dono working hours if necessary	FREE TEXT H or may be reached during
2	GROUP AFFILIATION (Subfile 65.51) Multiple	POINTER
	.01 GROUP AFFILIATION These are groups with which the dom	POINTER TO BLOOD BANK UTILITY FILE (#65.4) or may be associated.
	.02 FULL NAME	COMPUTED
3	DONOR SCHEDULING (Subfile 65.52) .01 BLOOD DONOR COMMENTS	Field Not in Use Field Not in Use

	Fiel	d				
	Help	Prompt				
Field#	Desc	ription	Data Type			
4	DONC Mult	R SCHEDULING/RECALL (Subfile 65.53)	SET			
	.01	DONOR SCHEDULING/RECALL	SET			
			1' FOR JAN;			
			2' FOR FEB;			
			'3' FOR MAR;			
			4' FOR APR;			
			S FOR MAL			
			'S' FOR AUC:			
			9' FOR SEP:			
			10' FOR OCT;			
			'11' FOR NOV;			
			12' FOR DEC;			
			`13' FOR 7/4;			
			'14' FOR LABOR DAY;			
			15' FOR XMAS;			
	16' FOR EMERGENCY;					
	purp	e are donors placed on a specific re poses.	ecall list for recruitment			
5	DONATION OR DEFERRAL DATE (Subfile 65.54) DATE Multiple					
	.01	DONATION OR DEFERRAL DATE	DATE (PM = Exact date (with and day) required and echo the answer; allows dates up to and including the current date)			
		These are the dates of donation or of Date when a person appears for dona date is the deferral date; otherwise	deferral. tion. If no donation then this e it is the donation date.			
	.011	DONATION ENTERED/EDIT BY Person entering or editing donation	POINTER TO NEW PERSON FILE (#200) information.			
	.02	COLLECTION SITE	POINTER TO BLOOD BANK			
		Site at which a donation attempt is	made.			
	.03	DONATION GROUP	POINTER TO BLOOD BANK UTILITY FILE (#65.4)			
		Group affiliation for which a donat	ion attempt is made.			
	.13	ARRIVAL/APPT TIME	DATE (PM = Exact date (with month and day) required and echo the answer; allows dates up to and including the current time)			
		Future date/time not allowed.				
		This is the date/time the donor arr donate.	ives for an appointment to			

	Field			
Fiold#	Help	Prompt wrintion	Data Timo	
rieiu#	14	FNTRY VIA OLD RECORDS	SET	
	• 1 7	ENIRI VIA OLD RECORDS	1' FOR YES;	
			`0' FOR NO;	
		If data entry for donation/deferral enter old records option, a `YES' is	date subfield is by way of the s entered in this field.	
	1	DONATION / DEFERRAL CODE	¢۳۳	
	Ŧ	DONATION/DEFERICAL CODE	W' FOR WHOLE BLOOD;	
			'P' FOR PLASMAPHERESIS;	
			'C' FOR CYTAPHERESIS;	
			'N' FOR NO DONATION;	
		This is the result of donation attent the type of donation is entered.	mpt. If donation successful,	
	1.1	DONATION TYPE	SET	
			'H' FOR HOMOLOGOUS;	
			'A' FOR AUTOLOGOUS;	
			'T' FOR THERAPEUTIC;	
		mbia ia tha danatian tana	'D' FOR DIRECTED;	
		This is the donation type.		
	1.2	RESTRICTED FOR	FREE TEXT	
	If autologous donation donor must be the same as the patie		e the same as the patient	
		If autologous donor must also be the	e patient selected.	
		If directed donation can be any pat:	ient selected.	
	2	DEFERRAL REASON (Subfile 65.55)	POINTER	
	-	Multiple		
		.01 DEFERRAL REASON	POINTER TO BLOOD BANK UTILITY	
			FILE (#65.4)	
		These are the reasons for which	the donor is deferred.	
	3	DONOR REACTION CODE	POINTER TO BLOOD BANK UTILITY	
			FILE (#65.4)	
		Any adverse reaction which the dono:	r might have suffered during or	
		immediately following the blood dona	ation.	
	4	מד יידואנו	FREE TEXT	
	-	UNIQUE ID ASSIGNED TO PRIMARY UNIT		
		Enter ID that component(s) prepared	from donation will be labeled.	
		This determines that the donor ID as	ssigned to another donation	
		within the past 5 years will not be	allowed.	
	4.1	PRIMARY BAG	SET	
			'1' FOR SINGLE;	
			`2' FOR DOUBLE;	
			'3' FOR TRIPLE;	
			`4' FOR QUADRUPLE;	
			'5' FOR QUINTUPLE;	
		This is the type of bag used for the blood.	e collection of the donor	

	Field		
Field#	Desc	ription	Data Type
	4.11	ANTICOAGULANT/ADDITIVE	SET '1' FOR CPD; '2' FOR ACD; '3' FOR CPDA-1; '4' FOR ADSOL;
		This is the type of anticoagulant is	n the collection bag.
	4.15	BAG LOT # ANSWER MUST BE 1-15 CHARACTERS IN L This is the lot number of the colle NOTE: The entry for the THIRD DEFAU SITE file (#69.9) controls whether input template.	FREE TEXT ENGTH ction bag. LT for DONOR in the LABORATORY this field is included in the
	4.2	DATE/TIME COLLECTION STARTED	DATE (PM=Exact date (with month and day) and time required and echo the answer)
		Date AND time must be entered !! This is the date and time the donat	ion was started.
	4.3	DATE/TIME COLLECTION COMPLETED This is the date and time the donat	DATE (PM=Exact date (with month and day) and time required and echo the answer) ion was completed.
	4.4	DATE/TIME PROCESSED DATE AND TIME COLLECTION WAS PROCES Date/time at which the component pr	DATE (PM=Exact date (with month and day) and time required and echo the answer; allows dates up to and including the current time) SED eparation started.
	4.5	COLLECTED PRIMARY UNIT WT (gm) WEIGHT IN GRAMS OF COLLECTION INCLU TYPE A NUMBER BETWEEN 1 AND 9999 This is the gross weight of the uni	NUMBER DING CONTAINER t collected.
	4.6	EMPTY PRIMARY UNIT WT (gm) WEIGHT IN GRAMS OF COLLECTION CONTA TYPE A NUMBER BETWEEN 1 AND 1000 Weight of the empty donor bag (prim	NUMBER INER ary bag only).
	4.7	COLLECTION VOL (ml) TYPE A WHOLE NUMBER BETWEEN 1 AND 9 Volume of blood collected (ml) Algorithm: (Volume = collected prin primary unit wt (gm) divided by 1.0	NUMBER 999 mary unit wt (gm) minus empty 6)

	Fiel	'ield		
	Help Prompt			
Field#	Desc	ription	Data Type	
	4.8 PROCESSING TECH POINTER TO NEW PERSON FILE Person performing the component preparation.			
	5	PATIENT CREDIT Enter patient for donation credit Patient for whom a unit of blood wa the "replacement" be credited.	FREE TEXT s donated, i.e. to whom should	
	6	PHLEBOTOMIST ANSWER MUST BE 2-30 CHARACTERS IN L Name of person performing the colle	FREE TEXT ENGTH ction.	
	6.1	COLLECTION DISPOSITION Records what happened to the collect	SET `0' FOR PREPARE COMPONENT(S); `1' FOR QUARANTINE; `2' FOR DISCARD COLLECTION; tion.	
	6.2	COLLECTION DISPOSITION COMMENT (Sub Multiple .01 COLLECTION DISPOSITION COMMENT ANSWER MUST BE 2-80 CHARACTERS These are comments regarding th	file 65.546) FREE TEXT IN LENGTH ne collection disposition.	
	7	<pre>RBC TYPING METHOD (Subfile 65.61) .01 RBC TYPING METHOD .02 TECHNIQUE .03 TECHNOLOGIST 1 ANTISERUM (Subfile 65.62) .01 ANTISERUM .02 LOT # .03 INTERPRETATION .04 IS .05 37 C .06 AHG .07 CONTROL CELL .08 ROOM TEMP .09 12-18 C .1 4 C</pre>	Field Not in Use Field Not in Use	
	8.1	DONOR CELLS+ANTI A	Field Not in Use	
	8.2	DONOR CELLS+ANTI B	Field Not in Use	
	8.3	DONOR CELLS+ANTI A,B	Field Not in Use	
	8.4	DONOR PLASMA/SERUM+A1 CELLS	Field Not in Use	
	8.5	DONOR PLASMA/SERUM+B CELLS	Field Not in Use	
	9.1	DONOR CELLS+ANTI D	Field Not in Use	
	9.2	DONOR CELLS+RH CONTROL	Field Not in Use	

Field Help Prompt Field# Description Data Type 9.3 DONOR CELLS+ ANTI D (37 C) Field Not in Use 9.4 DONOR CELLS+RH CTRL (37 C) Field Not in Use 9.5 DONOR CELLS+ANTI D (AHG) Field Not in Use 9.6 DONOR CELLS+RH CTRL (AHG) Field Not in Use 10 ABO INTERPRETATION SET 'A' FOR A; 'O' FOR O; 'B' FOR B; 'AB' FOR AB; 'ND' FOR NOT DONE; INTERPRETATION OF ABO TESTING This is the interpretation of ABO grouping results. 10.2 TECH ENTERING-ABO INTERP POINTER TO NEW PERSON FILE (#200) This is the technologist entering ABO interpretation. 10.3 ABO TESTING COMMENT FREE TEXT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the ABO testing. 10.4 ABO INTERPRETATION RECHECK SET 'A' FOR A; 'O' FOR O; 'B' FOR B; 'AB' FOR AB; Recheck of ABO group interpretation. 10.5 TECH ENTERING-ABO RECHECK POINTER TO NEW PERSON FILE (#200) Technologist entering ABO grouping recheck. 10.6 ABO RECHECK COMMENT FREE TEXT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH. ABO grouping recheck comment. 11 RH INTERPRETATION SET 'NEG' FOR NEGATIVE; 'POS' FOR POSITIVE; 'ND' FOR NOT DONE; INTERPRETATION OF RH TESTING This is the interpretation of Rh typing results. 11.2 TECH ENTERING-RH INTERP POINTER TO NEW PERSON FILE (#200) This is the technologist entering Rh interpretation. 11.3 RH TESTING COMMENT FREE TEXT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH This is a comment concerning the RH testing. 11.4 RH INTERPRETATION RECHECK SET 'NEG' FOR NEGATIVE; 'POS' FOR POSITIVE; Rh interpretation recheck

	Field Name Help Prompt		
Field#	Descri	iption	Data Type
	11.5	TECH ENTERING-RH RECHECK	POINTER TO NEW PERSON FILE (#200)
		Technologist entering Rh type rech	leck.
	11.6	RH TESTING RECHECK COMMENT ANSWER MUST BE 1-80 CHARACTERS IN Rh testing recheck comment	FREE TEXT LENGTH
	12	SYPHILIS SEROLOGY	SET `1' FOR REACTIVE; `0' FOR NEGATIVE; `ND' FOR NOT DONE;
		This is the results of syphilis se	erology test.
	12.2	TECH-SYPHILIS SEROLOGY Technologist entering syphilis ser	POINTER TO NEW PERSON FILE (#200) cology results.
	12.3	SYPHILIS SEROLOGY COMMENT ANSWER MUST BE 1-80 CHARACTERS IN I This is a comment concerning the sy	FREE TEXT LENGTH /philis serology test.
	13	HBsAg	SET `1' FOR REACTIVE; `0' FOR NEGATIVE; `ND' FOR NOT DONE;
		These are the results of hepatitis	B surface antigen testing.
13.2 TECH-HBsAg Technologist entering Hep		TECH-HBsAg Technologist entering Hepatitis B	POINTER TO NEW PERSON FILE (#200) surface antigen test results.
	13.3	HBsAg COMMENT ANSWER MUST BE 1-80 CHARACTERS IN This is a comment concerning the H	FREE TEXT LENGTH IBSAg test.
	14	HIV ANTIBODY	SET `1' FOR REACTIVE; `0' FOR NEGATIVE; `ND' FOR NOT DONE;
		HUMAN IMMUNODEFICIENCY ANTIBODY These are results of HIV antibody	testing.
	14.2	TECH-HIV	POINTER TO NEW PERSON FILE (#200)
		Technologist entering HTLV-III tes	t results.
	14.3	HIV TESTING COMMENT ANSWER MUST BE 1-80 CHARACTERS IN This is a comment concerning the H	FREE TEXT LENGTH IIV test.

	Field Name Help Prompt		
Field#	Descri	ption	Data Type
	15	ANTIBODY SCREEN RESULT These are the results of antibody	SET `0' FOR NEGATIVE; "1' FOR POSITIVE; `ND' FOR NOT DONE; screening.
	15.2	TECH-ANTIBODY SCREEN Technologist entering antibody scr	POINTER TO NEW PERSON FILE (#200) reening test results.
	15.3	ANTIBODY SCREEN COMMENT ANSWER MUST BE 1-80 CHARACTERS IN This is a comment concerning the a	FREE TEXT LENGTH untibody screen.
	16	HBcAb These are the results of hepatitis	SET `1' FOR REACTIVE; `0' FOR NEGATIVE; `ND' FOR NOT DONE; core antibody testing.
	16.2	TECH-HBcAb This is the technologist entering results.	POINTER TO NEW PERSON FILE (#200) Hepatitis Core Antibody
	16.3	HBCAb TEST COMMENT ANSWER MUST BE 1-80 CHARACTERS IN This is a comment concerning the H	FREE TEXT LENGTH IBCAb test.
	17	ALT	SET `1' FOR ELEVATED; `0' FOR NOT ELEVATED; `ND' FOR NOT DONE;
		ALANINE-AMINO TRANSFERASE These are the results of alanine-a NOTE: The entry for the FIFTH DEFA LABORATORY SITE file (#69.9) contr included in the input template.	mino transferase testing. MULT for DONOR in the rols whether this field is
	17.2	TECH-ALT This is the technologist entering results.	POINTER TO NEW PERSON FILE (#200) alanine-amino transferase
	17.3	ALT TEST COMMENT ANSWER MUST BE 1-80 CHARACTERS IN This is a comment concerning the A	FREE TEXT LENGTH LLT test.
	18	HTLV-I ANTIBODY	SET `1' FOR REACTIVE; `0' FOR NEGATIVE; `ND' FOR NOT DONE;
		Results of HTLV-I antibody testing	1
	18.2	TECH-HTLV-I	POINTER TO NEW PERSON FILE (#200)
	18.3	HTLV-I TESTING COMMENT ANSWER MUST BE 1-80 CHARACTERS IN	FREE TEXT LENGTH

	Field Name				
	Help H	romp	t		
Field#	Descri	.ptio	n	Data Type	
	19	HCV Resu in t	ANTIBODY alts of hepatitis C virus (HCV) his field.	SET `1' FOR REACTIVE; `0' FOR NEGATIVE; `ND' FOR NOT DONE; antibody testing are entered	
	19.2	TECH	-HCV ANTIBODY	POINTER TO NEW PERSON FILE (#200)	
	19.3	HCV ANSW	ANTIBODY TESTING COMMENT ER MUST BE 1-80 CHARACTERS IN	FREE TEXT LENGTH.	
	20	HIV	ANTIGEN	SET `1' FOR REACTIVE; `0' FOR NEGATIVE; `ND' FOR NOT DONE;	
	NOTE: file templa	The (#69. ate.	entry for the SIXTH DEFAULT fo 9) controls whether this field	r DONOR in the LABORATORY SITE is included in the input	
	20.2	TECH Tech	-HIV ANTIGEN nologist performing HIV antige	POINTER TO NEW PERSON FILE (#200) on testing.	
	20.3	HIV ANSW Comm	ANTIGEN COMMENT VER MUST BE 1-80 CHARACTERS IN Nent related to HIV antigen tes	FREE TEXT LENGTH ting.	
	66	BLOC Mult	D COMPONENT (Subfile 65.66) iple	POINTER	
	These are blood components prep		e are blood components prepare	a from the collection.	
		.01	BLOOD COMPONENT	POINTER TO BLOOD PRODUCT FILE (#66)	
			The selection must be a blood Blood component prepared from	component. collection.	
		.02	COMPONENT DISP DATE/TIME	DATE (PM=Exact date (with month and day), time allowed and echo the answer; allows dates up to and including the current time)	
			DATE/TIME OF COMPONENT DISPOSE Date/time at which component w quarantined or discarded.	ITION was released to stock,	
		.03	DATE/TIME STORED	DATE (PM=Exact date (with month and day), time allowed and echo the answer; allows dates up to and including the current time)	
			Date/time component stored.		
		.04	EXPIRATION DATE	DATE (PM=Exact date (with month and day), time allowed and echo the answer; allows dates including the current and future times)	

	Field Name		
	Help Prompt	Ē	
Field#	Description	1	Data Type
		Cannot enter expired component component prepared.	ts. Expiration date/time of
	.05	COMPONENT VOL (ml) TYPE A WHOLE NUMBER BETWEEN 0 Volume in milliliters (ml) of	NUMBER AND 500 component prepared.
	.06	TECH LABELING This is the person initially r if appropriate, placing the co	POINTER TO NEW PERSON FILE (#200) reviewing the donor results and, prrect labels on the component.
	.07	DISPOSITION TECH Person verifying that the donc	POINTER TO NEW PERSON FILE (#200) or results and the labeling are
		acceptable and that the compon	ent can be released to inventory.
	.08	COMPONENT DISPOSITION	SET `0' FOR RELEASE COMPONENT; `1' FOR QUARANTINE; `2' FOR DISCARD;
		This is the disposition of com	mponent.
	1	COMPONENT DISPOSITION COMMENT Multiple	(Subfile 65.67)
		.01 COMPONENT DISPOSITION COMMENT ANSWER MUST BE 2-80 CHAR This is the reason compo	FREE TEXT ACTERS IN LENGTH nent quarantined or discarded.
	2	SEDIMENTING AGENT	Field Not in Use
	3	DRUG	Field Not in Use
	70	GENERAL APPEARANCE	Field Not in Use for Data
	71	VENIPUNCTURE SITE	Field Not in Use for Data
	72	ORAL TEMPERATURE	Field Not in Use for Data
	73	BLOOD PRESSURE	Field Not in Use for Data
	74	PULSE	Field Not in Use for Data Storage

	Field N Help Pr	ame				
Field#	Descrip	tion				Data Type
110101	7	4.3	PULSE CC	MMENT		Field Not in Use
	7	75	WEIGHT (lb)		Storage Field Not in Use for Data
	8	80	HEMOGLOE	IN		Storage Field Not in Use for Data
	8	81	HEMATOCR	IT.		Storage Field Not in Use for Data
	8	82	TOTAL SE	RUM PRO	FEIN	Field Not in Use
	8	33	SERUM PR	OTEIN EI	LECTROPHORESIS	(Subfile 65.6) Field Not in Use
			.01 SER	JM PROTE	IN ELECTROPHOR	ESIS
						Field Not in Use
	8	34	TaG			Field Not in Use
	8	35	TaM			Field Not in Use
	8	36	WBC			Field Not in Use
	8	37	POLYS			Field Not in Use
	8	88	EOSINOPH	ILS		Field Not in Use
	8	39	BASOPHIL	S		Field Not in Use
	9	0	LYMPHOCY	TES		Field Not in Use
	9	91	MONOCYTE	S		Field Not in Use
	9	2	PLATELET	COUNT		Field Not in Use
	5	500	WORKLOAD Multiple Tests or are ente	TEST/PI procedu	ROCEDURE (Subfigures containing	ile 65.599) POINTER g WKLD codes for donor workload
			.01 WORI	KLOAD TE	ST/PROCEDURE	POINTER TO LABORATORY TEST
			m			FILE (#60)
			are ente	red here	e.	g WKLD codes for donor workload
			1 COMPL Multi	ETE DATI ple	E/TIME (Subfile	e 65.5991)
			.01	COMPLET	TE DATE/TIME	DATE (PM=Exact date (with month and day) and time
				Used fo workloa	or workload read needs to be	required and echo the answer) cording. If x-ref exists, counted.
			.02	TECH		POINTER TO NEW PERSON File (#200)
			1 WKLD Multi	CODE (Su ple	ubfile 65.5991	1) POINTER
			.01	WKLD CO	DE	POINTER TO WKLD CODE file(#64)
			.02	WKLD CO Type a	DE COUNT Number between	NUMBER 0 and 999, 0 Decimal Digits
			.03	CODE CO	UNTED	SET `1' FOR YES; `0' FOR NO;

	Field		
	Help Prompt		
Field#	Description	Data Type	
6.1	RBC ANTIGEN PRESENT (Subfile 65.56) Multiple	POINTER	
	.01 RBC ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)	
	Antigens identified as present on donor.	the red blood cells of the	
	SNOMED codes can be entered as well Synonyms can also be used if they a (#61.3)	l as the name of the antigen. are in the FUNCTION FIELD file	
	1 COMMENT	Field Not in Use	
6.2	RBC ANTIGEN ABSENT (Subfile 65.57) Multiple for RBC Antigen absent	POINTER	
	.01 RBC ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)	
	1 COMMENT	Field Not in Use	
6.3	HLA ANTIGEN PRESENT (Subfile 65.58) Multiple for HLA antigen present	POINTER	
	.01 HLA ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)	
	1 COMMENT	Field Not in Use	
6.4	HLA ANTIGEN ABSENT (Subfile 65.59) Multiple for HLA antigen absent	POINTER	
	.01 HLA ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)	
	1 COMMENT	Field Not in Use	
6.5	CMV ANTIBODY	SET `0' FOR NEG; `1' FOR POS;	
	A negative or positive result for the C	ytomegalovirus antibody	
9	BLOOD DONOR COMMENTS (Subfile 65.52)		
63	.01 BLOOD DONOR COMMENTS This field contains comments about the LABORATORY REFERENCE Field Not in Use	WORD-PROCESSING donor not found elsewhere.	
99	PERMANENT DEFERRAL REASON (Subfile 65.9	9)	
	.01 PERMANENT DEFERRAL REASON Reason(s) why donor is permanently defe	WORD-PROCESSING	

2. BLOOD DONOR file (#65.5) Data Copied/Entere**d**n BLOOD INVENTORY file (#65) Upon Labeling/Release of Unit

File 6 Field#	5 Field Name	File 65.5 Field of Data Origin	Data Copied/Entered
.01	UNIT ID	Subfile 65.54,4	Exact
.02	SOURCE	NA	Assigns Self
.03	INVOICE#	NA	Assigns 00
.04	COMPONENT	Subfile 65.66,.01	Exact
.05	DATE/TIME RECEIVED	Subfile 65.66,.02	Exact
.06	EXPIRATION DATE/TIME	Subfile 65.66,.04	Exact
.07	ABO GROUP	Subfile 65.54,10	Exact
.08	RH TYPE	Subfile 65.54,11	Exact
.11	VOLUME (ml)	Subfile 65.66,.05	Exact
.16	DIVISION	NA	Assigns based on division of user releasing unit
8	RESTRICTED FOR	Subfile 65.54,1.2	Exact if data exists, i.e., directed or autologous unit
8.1	POS/INCOMPLETE SCREENING TESTS	NA	Assigns'YES' based on established algorithm
10	ABO INTERPRETATION	Subfile 65.54,10	Exact IF recheckis designated for transfer based on site parameter File setup
10.2	TECH ENTERING-ABO INTERP	Subfile 65.54,10.2	Exact IF recheck is designated for transfer based on site parameter File setup
10.4	ABO MOVED FROM DONOR FILE	NA	Assigns `YES' if data is transferred

File 6 Field#	55 Field Name	File 65.5 Field of Data Origin	Data Copied/Entered
11 reched	RH INTERPRETATION	Subfile 65.54,11	Exact IF
			is designated for transfer based on site parameter File setup
11.2	TECH ENTERING-RH INTERP	Subfile 65.54,11.2	Exact IF recheck is designated for transfer based on site parameter File setup
11.4	RH MOVED FROM DONOR FILE	NA	Assigns `YES' if data is transferred
60	RBC ANTIGEN PRESENT (Subfile 65.04) .01 RBC ANTIGEN PRESENT	Subfile 65.56,.01	Exact
70	RBC ANTIGEN ABSENT (Subfile 65.05) .01 RBC ANTIGEN ABSENT	Subfile 65.57,.01	Exact
80	HLA ANTIGEN PRESENT (Subfile 65.08) .01 HLA ANTIGEN PRESENT	Subfile 65.58,.01	Exact
90	HLA ANTIGEN ABSENT (Subfile 65.09) .01 HLA ANTIGEN ABSENT	Subfile 65.59,.01	Exact
91	CMV ANTIBODY	Subfile 65.5,6.5	Exact

Software Limitations

Functionality	Description of Software Limitations
Donor - Registration, Screening and	No evaluation of donor screening responses.
Collection	No evaluation of donor history/physical results.
	No evaluation of volume of blood drawn.
	No evaluation of frequency and timing of autologous
	donations.
	No automatic updating of deferral status.
	No automatic updating and evaluation of donor
	recruitment/recall information based on actual
	donation data.
	No evaluation of information regarding confidential
	self-exclusion.
	No provision of an electronic system of records for
	donor medical history information.
	No provision of an electronic system of records of
	therapeutic phlebotomy requests.
	Partial provision of an electronic system of records for
	apheresis procedures.
Donor - Component Preparation	No system of blood component quality control records.
	No evaluation of components which can be prepared bas
	on an evaluation of donation types.
	Partial system for evaluating mutually exclusive
	components.
Donor Processing/Transfusion	No evaluation of results to determine requirements for
Transmitted Disease Marker Testing	repeat and/or confirmatory testing.
	No evaluation of quality control results to validating
	runs.
	No provision for test result interpretation based on
	actual testing results, (e.g. evaluation of actual
	Instrument readings or reactions of antisera).
	Manual entry of test result interpretations for all
	Manual antry of APO/Ph confirmation testing
	(rechecke)
	(recircus). No provision for donor patification of abnormal test
	results.
	No provision for notification of recipient's physician if
	test result is reactive for unit which was
	labelled/released with incomplete testing.
	No system for proficiency testing.
Donor Phenotyping	Manual entry of test result interpretations.

Functionality	Description of Software Limitations
Donor Labeling/Release	No system for quarantining of in-date units based on
	donor look-back procedures.
	No provision for determining the suitability for
	subsequent transfusion of units prepared from
	therapeutic phlebotomy.
	No system for ensuring application of biohazard labels
	to autologous units when appropriate.
Donor Records	No provision of an electronic system of records for
	donor medical history information.
	No provision of an electronic system of records for
	confidential self-exclusion.
	No provision of an electronic system of records of
	therapeutic phlebotomy requests.
	Partial provision of an electronic system of records for
	apheresis procedures.
	No automatic updating of deferral status.
	No system of blood component quality control records.
	No provision system of records for actual test results,
	(i.e., manual entry of test result interpretations for all
	required testing).
	No system for tracking disposal of discarded units.
	No provision for documentation of indication for
	emergency issue of incompletely tested units.

Intended Uses

IU#	Functionality	Description of Intended Uses
D1	Donor-General	Provision of a unique cumulative donor record for each individual blood donor/patient based on data elements detailed above for the BLOOD DONOR file (#65.5).
D2	Donor - General	Provision of a unique cumulative donation sub-record for each individual donation/deferral date.
D3	Donor- General	Tracking of the donation type for each donation, i.e., homologous, autologous, therapeutic, or directed.
D4	Donor - General	Record updates immediately upon data entry.
D5	Donor - General	Tracking of the person performing various steps in the process, i.e., the person entering the data into the computer.
D6	Donor - General	Accommodation of a bar code reader for entry of the unit ID.
D7	Donor-General	Tracking of changes in verified data for specific data elements defined for the BLOOD DONOR file (#65.5) as detailed in Section IX under Functional Requirements
D8	Donor-General	Maintenance of donor confidentiality by providing different levels of security access such that the type of data access can be defined by individual user.
D9	Donor-General	Minimal potential for data entry errors based on control of the data type and the input format through the use of a highly structured data dictionary and input transforms.
D10	Donor - General	Limited simultaneous access by multiple terminals/ users to the same donor record for purposes of data entry in specified options.
D11	Donor-Old Records	Entry of historical donor information if deemed appropriate and identification of the specific donation dates for which data was entered via that option.
D12	Donor-Old Records	Check of the unit IDs during data entry of each unit ID, to determine if that unit ID is already in existence in the BLOOD INVENTORY file (#65) in order to identify potential duplicates/inappropriate entries.
D13	Donor-Old Records	Restricted access to donor through the 'Old records' option once the donor record has been created.
D14	Donor-Registration, Screening and Collection	Check the existing entries in the BLOOD DONOR file (#65.5) during the registration of each blood donor, to identify potential duplicate donors.
D15	Donor - Registration, Screening and Collection	Evaluation of the donation intervals for allogeneic (homologous) blood donors.
D16	Donor-Registration, Screening and Collection	Calculation of the age of donor based on his/her date of birth and subsequent evaluation of the age of the donor to see if outside defined limits, (i.e., ≤ 17 or >65 years of age).

IU#	Functionality	Description of Intended Uses
D17	Donor-Registration, Screening	Site specific control to edit the donor history questions
	and Collection	at the discretion of the facility in order to meet changes
		in regulatory and accrediting agency requirements.
		(Requires higher security level).
D18	Donor-Registration, Screening	Site specific control to edit the donor consent in order
	and Collection	to meet changes in regulatory and accrediting agency
D10		requirements. (Requires higher security level)
D19	Donor - Registration, Screening	Donor specific donor history form which contains the
	and Collection	donor demographics, date of last donation and site
		specific donor filstory questions and site specific donor
D20	Dopor Pogistration Screening	Identification of denors who have been placed in a
D20	and Collection	'permanent deferral' status and flagging of those
		donors when appropriate
D21	Donor - Registration Screening	Provision of a report of permanently deferred donors
241	and Collection	for use at remote sites where the computer system is
		not accessible and/or preprinted donor history forms
		may not be available for all potential donors.
D22	Donor - Registration, Screening	Entry of collection data through routinely used options
	and Collection	restricted if allogeneic (homologous) donor is
		permanently deferred.
D23	Donor-Registration, Screening	Warning message; if an autologous donor or
	and Collection	therapeutic phlebotomy patient who is permanently
		deferred is selected for data entry.
D24	Donor - Registration, Screening	Entry of special comments for future reference so that
	and Collection	donors who require special handling can be identified
Dar		and appropriate procedures can be implemented.
D25	Donor - Registration, Screening	Provision of link between autologous donor/patient in
	and Collection	an effort to ensure that autologous units are made
		blood is selected
D26	Donor - Registration Screening	Identification of units collected in bags of a specific lot
D20	and Collection	in case of potential recalls.
D27	Donor - Registration, Screening	Calculation of collection volume based on the gross
	and Collection	weight, the empty bag weight and the specific gravity
		of whole blood.
D28	Donor-Registration, Screening	Evaluation of unit ID to prevent assignment of
	and Collection	"duplicate" unit IDs based on a search of existing
		entries in the BLOOD DONOR file.(#65.5)
D29	Donor-Registration, Screening	Free text special comments in the BLOOD DONOR
.	and Collection	COMMENTS field (#.01) for future reference
D30	Donor-Registration, Screening	Tracking of whether the donor had a donor reaction,
	and Collection	making information available through a variety of
D91	Donon Degistration Semaning	report and inquiry options.
160	and Collection	of a future date
D32	Donor-Registration Screening	Screen on the entry of the collection completion
100	and Collection	date/time to ensure it is not prior to the collection start
		date/time.

IU#	Functionality	Description of Intended Uses
D33	Donor - Component	Tracking of all collection dispositions and tracks
	Preparation	storage and disposition of all components prepared.
D34	Donor - Component	Tracking of the person performing various steps in the
	Preparation	process, i.e. the person entering data into the
	-	computer.
D35	Donor-Component Preparation	Restricted access to the donor's most recent donation,
		(i.e., user cannot specify a unit ID) which is from other
		than the most recent donation.
D36	Donor - Component	Evaluation of the component preparation time to
	Preparation	ensure that components are prepared within the
	-	maximum time allowable for that specific component.
D37	Donor - Component	Evaluation of the number of components prepared
	Preparation	versus type of collection bag.
D38	Donor - Component	Exclusion of more than 1 RBC component for
	Preparation	preparation from a donor unit.
D39	Donor - Component	Exclusion of incompatible components based on the
	Preparation	anticoagulant of the donor unit and that of components
		being prepared.
D40	Donor - Component	Calculation of the date portion of the expiration date
	Preparation	for each component based on the donation date and the
	-	specific component.
D41	Donor-Component Preparation	Tracking of data on the date/time stored for each
		specific component of a specific unit ID.
D42	Donor-Component Preparation	Evaluation of the elapsed time between the collection
		time and the date/time stored for the specific
		component to prevent entry of data for a component for
		which the maximum allowable component preparation
		time has been exceeded.
D43	Donor-Processing/TTD Marker	Expedited data entry for donor IDs by incrementing
	Testing	the unit IDs and displaying that number as the default
D44		IF the next logical unit ID exists.
D44	Donor-Processing/TTD Marker	Check of current ABO/Rh results for the specific donor
D.15	1 esting	unit against the donor's historical record.
D45	Donor-Processing/IID Marker	Comparison of the recheck information to original
	Testing	processing result interpretations if ABO/Rn unit
		recnecks are performed prior to the release of the unit
		to inventory, father than after the unit is released to
		ABO/Ph are NOT displayed at the time of data entry
D46	Dopor-Processing/TTD Marker	Comparison of the user identification and the entry in
D40	Testing	the tech field for the original results to prevent the
	lesenig	same tech from entering both original and recheck
		results for ABO/Rh
D47	Donor-Processing/TTD Marker	Determination of whether ALT and HIV Ag testing is
211	Testing	required, and specifically which of these fields should
		be accessible during data entry based on site specific
		parameters.
D48	Donor-Processing/TTD Marker	Entry of test result interpretations for each unit ID. for
	Testing	subsequent evaluation during labeling/release, i.e., no
		batch entry.

IU#	Functionality	Description of Intended Uses
D49	Donor-Processing/TTD Marker Testing	Generation of worklists for any of the tests. These lists include any incomplete testing, i.e., unit IDs for which there are no test results or which were added back to the worklist pending completion of repeat and/or confirmatory testing.
D50	Donor-Processing/TTD Marker Testing	Automatic generation of a bulletin detailing the test result sent to all holders of a specific security key. If the results of the transfusion transmitted disease marker testing are entered as anything other than "negative" or "non-reactive" for units that have already been released to inventory on an emergency basis, regardless of the donation type.
D51	Donor-Processing/TTD Marker Testing	Restriction on the level of security access required to edit result interpretations after components have been released to inventory.
D52	Donor-Processing/TTD Marker Testing	Reports of donor testing results to allow data review before the actual labeling of the donor units if so desired.
D53	Donor Phenotyping	Use of a standardized coding system, i.e. SNOMED, for identifying both RBC and HLA antigens and antibodies
D54	Donor Phenotyping	Prevention of data entry which makes the same antigen both 'present' and 'absent'.
D55	Donor-Labeling/Release	No release of "duplicate" unit IDs to inventory.
D56	Donor-Labeling/Release	Release of units to inventory prohibited if no current ABO/Rh results exist.
D57	Donor-Labeling/Release	Transfer of selected data from the BLOOD DONOR file (#65.5) to the BLOOD INVENTORY file (#65) as detailed above.
D58	Donor-Labeling/Release	Release of units to inventory prohibited if the check of the current ABO/Rh results for the specific donor unit against the donor's historical record indicate a discrepancy and the ABO/RH recheck data is to be transferred to the BLOOD INVENTORY file (#65) when the unit is released.
D59	Donor-Labeling/Release	Automatic generation of a bulletin detailing the test result sent to all holders of a specific security key. If the check of the current ABO/Rh results for the specific donor unit against the donor's historical record indicate a discrepancy, but the ABO/RH recheck data is NOT to be transferred to the BLOOD INVENTORY file (#65) when the unit is released.
D60	Donor-Labeling/Release	Detailed reports of donor's historical ABO/RH, permanent deferral (if appropriate), test results and component information for review prior to labeling and/or for hard copy documentation.
D61	Donor-Labeling/Release	Evaluation of TTD marker testing results such that release of homologous, directed donor and therapeutic phlebotomy units with positive disease marker testing results is prevented.
IU#	Functionality	Description of Intended Uses
-----	------------------------	--
D62	Donor-Labeling/Release	Automatic quarantine of components if an attempt is made to label/release a unit for which the results indicate that the unit is not suitable for release to inventory, i.e. are positive or reactive.
D63	Donor-Labeling/Release	Requirement for a higher level of security access to make changes in the status of a component previously placed in 'quarantine'.
D64	Donor-Labeling/Release	Verification of the accuracy of labeling of ABO/Rh via bar code reader by comparing the scanned ABO/RH label to the ABO/RH results for that unit ID.
D65	Donor-Labeling/Release	Comparison of the identity of the user attempting to release the unit with the entry in the TECH LABELING field for that specific unit in order to prevent the same tech doing both labeling & verifying if labeling/release is done manually.
D66	Donor-Labeling/Release	Assignment of a final disposition of RELEASE to each component in the BLOOD DONOR file (#65.5) and automatic creation of a new entry in the BLOOD INVENTORY file (#65) with specific associated data elements for each component which is labeled/released.
D67	Donor-Labeling/Release	Assignment of the division of the user who is labeling/ releasing the unit into inventory to the unit when the unit is assigned a final disposition in the BLOOD DONOR file (#65.5) and unit is entered into the BLOOD INVENTORY file (#65).
D68	Donor-Labeling/Release	Tracking of both allogeneic (homologous) and autologous units which are released to inventory with incomplete transfusion transmitted disease marker testing such that those units are identified if subsequent attempts are made to modify the unit into another blood component or to ship the unit to another facility.
D69	Donor-Labeling/Release	For autologous units released to inventory with positive/ incomplete testing, release of the unit for use by other patients or modification of the unit into other non-autologous components is prevented.
D70	Donor-Labeling/Release	Transfer of ABO/Rh confirmatory testing results to the BLOOD INVENTORY file (#65) if appropriate based on the site parameters.
D71	Donor-Labeling/Release	Inclusion of the unit in the queue for the Inventory ABO/Rh worklist if the unit contains red cells and data for ABO/Rh confirmatory testing is not transferred to the Inventory based on the site parameters.
D72	Donor-Labeling/Release	For autologous and directed components, display of the name of the patient that the unit is 'RESTRICTED FOR' in an attempt to make sure that the unit is segregated appropriately.
D73	Donor-Records	On-line storage of a unique cumulative donor history for look-back purposes.

IU#	Functionality	Description of Intended Use
D74	Donor-Records	Generation of a hard copy printout of the cumulative donor history prior to removal of the donors from the computer system for those donors who have not donated since a specified date.
D75	Donor-Records	Mechanism for merging data (donation sub-records) from two donor records in the event that a duplicate donor record was created in error.
D76	Donor-Recruitment	Report of all donors who indicated a specific group affiliation to provide feedback to donor group chairpersons. Users can specify search criteria for the group affiliation and the range of donation/deferral dates to be included. Reports are sorted by group affiliation and include donor name, ABO/Rh, donation/deferral date, donation/deferral code, donor reaction code and deferral reason.
D77	Donor-Recruitment	Entry of data regarding donation group and collection site such that activity reports can be generated to provide feedback to donor group chairpersons. Users can specify search criteria based on the specific report selected. Reports include donor group affiliation, donation group and or collection site in addition to donor name, ABO/Rh, donation/deferral date, donation/deferral code, donor reaction code and deferral reason.
D78	Donor-Recruitment	Entry of standardized letters that can be generated, based on their group affiliation information, and used for specific targeted donor recruitment efforts.
D79	Donor-Recruitment	Entry of standardized letters, which can be generated, based on a search of all donors who lack a specific RBC antigen, and used for specific targeted donor recruitment efforts.
D80	Donor-Recruitment	Entry of standardized letters which can be generated based on a search of all donors who have not donated since a specified date to be used for specific targeted donor recruitment efforts.
D81	Donor-Recruitment	Generation of post visit thank you letters for donors who attempted to donate based on the list of donors created when the donation/deferral data was entered through the Donor registration [LRBLDLG] option.
D82	Donor-Recruitment	Generation of letters for various groupings of donors based on specified criteria and type of letter selected, inserting the donor name and address for the addressee for those donors identified in the search criteria.
D83	Donor-Recruitment	Generation of labels including the donor name and address for various groupings of donors based on specified criteria.
D84	Donor-Recruitment	Generation of a list of donors who have not donated since a specified date, including their name, date of last donation, group affiliation, home phone and work phone.

IU#	Functionality	Description of Intended Use
D85	Donor-Recruitment	Report of all donors who have indicated their willingness to be called on an emergency basis, including their name, ABO/Rh, home phone, work phone, last donation date and donation/deferral code from the last donation date. NOTE: Users can specify ABO/Rh and date range for donations to be included on report.
D86	Donor-Recruitment	Report of all donors who have indicated their willingness to be called on a regular basis for specified months and/or holidays, including their name, ABO/Rh, home phone, work phone, last donation date, and donation/deferral code from the last donation date.
D87	Donor-Recruitment	Report of all donors who have indicated their willingness to be called to be apheresis donors or for which no data was entered regarded their apheresis interest, sorted by ABO/Rh, including their name, ABO/Rh, home phone, work phone, last donation date and donation/deferral code from the last donation date.
D88	Donor-Recruitment	Calculation of cumulative donation totals based on user specific formula and previously entered donation data and provides reports to be used for donor awards.
D89	Donor-Recruitment	Mechanism to enter the fact that a donor was given a gallon donor award and provides a report listing all donors who have received gallon donor awards.
D90	Donor-Recruitment	Report of all first time donors for a specified period based on the entry in the date registered/edited field, including collection site, donation group, donor name, work phone, donation/deferral date, donation/deferral type and the deferral reason.
D91	Donor-Recruitment	Report of patient credits in order to provide feedback as the effectiveness of any recruitment efforts directed at the friends/relatives of patients, including the patient name, the donor name, and the donation/deferral date.
D92	Donor-Management	Report of short draw collections, (i.e., those whose collection volume is less than 405 ml, for a specified date range for supervisory review, sorted by donation date, including unit ID, collection volume, donor reaction code, phlebotomist, donation/deferral date, and collection site).
D93	Donor-Management	Report on donor temporary deferrals for a designated period, sorted by collection site and donation date. This can be used for supervisory review in order to identify trends or problems with donor deferrals, including the collection site, the deferral date, the donation group, the donor name, and the deferral reason.

IU#	Functionality	Description of Intended Use
D94	Donor-Management	Report of units that are quarantined/discarded prior to component preparation for supervisory review. This includes specified data fields, (i.e., donation date, unit ID, collection site, collection time started and completed, collection volume, donor reaction code, phlebotomist, collection disposition, and collection disposition comment).
D95	Donor-Management	Report of the collection and component preparation information, sorted by donation date, for supervisory review, including specified data fields, i.e., unit ID, type of donation, type of bag, anticoagulant, duration of collection in minutes, processing time in minutes, collection disposition, processing tech, blood components prepared, volume of components in ml, and storage time.
D96	Donor-Management	Blood product rejection report for those units which are collected, have components prepared and have component dispositions of 'discard' or 'quarantine', sorted by donation/deferral date, including unit ID, collection time, collection volume, component preparation time, component preparation tech, component, date/time component stored, component net weight, component disposition and component disposition comment.
D97	Donor-Management	Report of abnormal test results for a specified range of donor unit ID numbers to be used for supervisory review, including donation date, unit ID, donor internal file number and test(s) for which results were abnormal, i.e., did not meet the criteria for subsequent release for transfusion, and excluding the donor names for confidentiality purposes.
D98	Donor -Statistics	Report of all donors who attempted to donate for a specified date range, sorted by donation group, including donor name, work phone, last attempt date, donation type, and cumulative donations.
D99	Donor -Statistics	Report of scheduling information for specified date range for use in evaluating staffing needs, including donation/deferral date, arrival/appointment time, unit ID, donation/deferral code, donation type, and patient credit.
D100	Donor -Statistics	Capture of workload information and transfer of data to non-BB laboratory files for use in a variety of local and national reports, including the CAP Laboratory Management Index Program and DSS.

B. Inventory Functions

1. BLOOD INVENTORY file (#65) Description of Data Elements

	Field Name	
	Help Prompt	
Field#	Description	Data Type (PM=Pattern Match)
.01	UNLT ID	FREE TEXT (PM=Any
		alphanumeric, upper of lower
	ANGWED MUCT BE 2-12 CHADACTEDS IN LENGTH	case, punctuation anowed)
	The unit identification on the blood pro	oduct label.
.02	SOURCE	FREE TEXT (PM - see note)
	Entry must be one of the following:	
	Collecting facility	
	NOTE: Although this is stored as free te	ext, the input choices are
	in the BLOOD PRODUCT FILE (#66)	leid for the specific component
.03	INVOICE#	FREE TEXT
	ANSWER MUST BE 2-10 CHARACTERS IN LENGTH	1
	Number on invoice accompanying unic.	
.04	COMPONENT	POINTER TO BLOOD PRODUCT
	Name of blood product file (#66)	
0.5		
.05	DAIE/IIME RECEIVED	month and day) and time
		required and echo the answer;
		allows dates up to the current
		time)
	Date/time component received. Allows cur disallows future times.	rrent and past times but
0.5		
.06	EXPIRATION DATE/TIME	DATE/TIME (PM=Exact date
	Expiration date/time of unit.	(with month and day) required,
	time	allowed and echo the answer)
.07	ABO GROUP	SET
		'A' FOR A;
		'B' FOR B;
		'O' FOR O;
		AB' FOR AB;
	ABO blood group of unit. If ABO group is	s not applicable to the unit or
	component (ex. a mixed pool of compatibl	Le ABO types) enter NA for N/A
	(not applicable).	
.08	RH TYPE	SET
		'NEG' FOR NEGATIVE:
		'NA' FOR N/A;
	Rh type of unit. If RH TYPE not applicat	ole to the unit or component
enter NA for N/A (not applicable or necessary).		

	Field Name	
	Help Prompt	
Field#	Description	Data Type (PM=Pattern Match)
.09	LOG-IN PERSON	POINTER TO NEW PERSON file (#200)
	Person entering unit in file.	
.1	COST	NUMERIC(PM=1 or more numeric; may have decimal followed by 2 numerics)
	TYPE A NUMBER BETWEEN 0 AND 99999 Cost of unit	
.11	VOLUME (ml)	NUMERIC(PM=1 or more
	TYPE A WHOLE NUMBER BETWEEN 0 AND 9999 Volume of unit or component	
.12	TYPING CHARGE	NUMERIC(PM=1 or more numeric; may have decimal followed by 2 numerics)
	TYPE A NUMBER BETWEEN 0 AND 999 Charge assigned by organization perform	ning antigen typing.
.13	SHIPPING INVOICE# Enter RETURN invoice # to SUPPLIER (2-1 Invoice (order) number identified with	FREE TEXT 0 characters) returned shipment to supplier.
.14	RETURN CREDIT Entry must begin with a minus (-) then Credit given for returning unit to supp	FREE TEXT amount of credit (ex37.50) lier or sending unit elsewhere
.16	DIVISION	POINTER TO INSTITUTION
	The division where the unit resides. If to another division, enter the New divi	the unit is being transferred sion.
.1.1	BAG LOT #	FREE TEXT
	Answer must be 1-15 characters in lengt You may enter the bag lot number if pre in inventory.	h. Pparing a component from a unit
.2	PATIENT XMATCHED/ASSIGNED (Subfile 65.0 Multiple	1) FREE TEXT
	.01 PATIENT XMATCHED/ASSIGNED On the right of NAME is the last charac Enter patient name, SSN, or first lette digits of SSN.	FREE TEXT (PM-see note) eters of the patient's SSN. er of last name and last 4
	NOTE: The data is stored as free text; the data entry routine allows only entr file (#2).	however, the input template for ies selected from the PATIENT
	.012 PARENT FILE	COMPUTED
	File where demographic data is stored f	or patient crossmatched.

	Fiel	.d Name		
	Help	Promp	t	
Field#	Desc	riptio	n	Data Type (PM=Pattern Match)
	.02	DATE/'	TIME UNIT ASSIGNED	DATE (PM=Exact date (with month and day) and time required and echo the answer; allows dates up to the current time)
		Date/ relea delet	time unit is crossmatched for sed from crossmatch for a spec ed.	each patient. If unit is ific patient the date/time is
	.03	LAST	SPECIMEN DATE XMATCHED	DATE/TIME (PM=Exact date (with month and day) required, time allowed and echo the answer)
	Date	e/time	of specimen unit was last xmat	cched with.
	NOTE of t XMAT	: Data the BLC TCHED/A	a not entered. Triggered by the OOD SAMPLE DATE/TIME subfield c ASSIGNED subfield of the BLOOD	e DATE/TIME CROSSMATCHED field of the PATIENT INVENTORY file.
	1	BLOOD Multi	SAMPLE DATE/TIME (Subfile 65. ple	02)DATE
		.01	BLOOD SAMPLE DATE/TIME	DATE (PM=Exact date (with month and day) required, time allowed/ and echo the answer; allows dates up to the current time)
			Date/time of blood sample use	d for pretransfusion testing.
		.02	TREATING SPECIALITY	FREE TEXT(PM=Any alphanumeric, upper or lower case, punctuation allowed - see note)
			ANSWER MUST BE 3-30 CHARACTER Not numeric or starting with Medical specialty treating pa	S IN LENGTH punctuation tient.
			NOTE: During routine data ent the information associated wi PHYSICIAN during the specimen stored as free text. It is un individual component request.	ry, this data is pulled from th the entry for the REQUESTING log-in process and is then related to the entry for the
		.03	PHYSICIAN	FREE TEXT (PM -see note)
			ANSWER MUST BE 3-30 CHARACTER Patient's physician	S IN LENGTH
			NOTE: During routine data ent the information associated wi PHYSICIAN during the specimen stored as free text. It is un individual component request.	ry, this data is pulled from th the entry for the REQUESTING log-in process and is then related to the entry for the

	Field Name		
	Help Promp	t	
Field#	Descriptio	n	Data Type (PM=Pattern Match)
	.04	XMATCH RESULT	SET `C' FOR COMPATIBLE; `I' FOR INCOMPATIBLE, UNSAFE TO TRANSFUSE; `CD' FOR COMPATIBLE, DON'T TRANSFUSE; `CF' FOR COMPATIBLE, FURTHER STUDY NEEDED; `IG' FOR INCOMPATIBLE GIVE
		Interpretation of major cross	WITH BB DIRECTOR APPROVAL match.
	.05	XMATCH TECH Person performing crossmatch	POINTER TO NEW PERSON FILE (#200)
	.06	PATIENT SAMPLE ACC # ANSWER MUST BE 1-12 CHARACTER Blood bank accession number f	FREE TEXT S IN LENGTH or patient sample.
	.07	TREATING SPECIALTY NUMBER	POINTER TO FACILITY TREATING SPECIALTY FILE (#45.7)
		Internal entry # in treating specialty file.	
	.08	PROVIDER NUMBER Internal entry # in the NEW P If the physician is an entry number is stored here.	POINTER TO NEW PERSON FILE(#200) PERSON file in the NEW PERSON file the printer
	.09	DATE/TIME CROSSMATCHED The date/time of the blood sa	DATE (PM=Exact date (with month and day) and time required and echo the answer) mple crossmatch
	.1	RELEASE REASON ANSWER MUST BE 2-40 CHARACTER NOTE: In addition to free tex entries in the LAB DESCRIPTIC RELEASE as the screen.	FREE TEXT S IN LENGTH t, the user can select from NS File (#62.5) which have BB
	1	MAJOR XMATCH METHOD (Subfile .01 MAJOR XMATCH METHOD .02 TECHNIQUE .03 INTERPRETATION .04 IS .05 37 C .06 AHG .07 CONTROL CELL .08 ROOM TEMP .09 12-18 C .1 4 C	65.0911) Field Not in Use Field Not in Use

	Field Nam Help Prom	ne npt	
Field#	Descripti	.on	Data Type (PM=Pattern Match)
	2	MINOR XMATCH METHOD (Subfile	65.0912)
			Field Not in Use
		.01 MINOR XMATCH METHOD	Field Not in Use
		.02 TECHNIQUE	Field Not in Use
		.03 INTERPRETATION	Field Not in Use
			Field Not in Use
		.06 AHG	Field Not in Use
		.07 CONTROL CELL	Field Not in Use
		.08 ROOM TEMP	Field Not in Use
		.09 12-18 C	Field Not in Use
		.1 4 C	Field Not in Use
	3	CROSSMATCH COMMENT (Subfile Multiple	65.0913)
		These are comments relating specific donor unit.	to the crossmatch of the
		NOTE: These comments become transfusion record of the pa transfused to the patient.	part of the permanent tient if the unitis subsequently
		.01 CROSSMATCH COMMENT ANSWER MUST BE 2-80 CHAR	FREE TEXT RACTERS IN LENGTH
		NOTE: In addition to free te entries in the LAB DESCRIPTI TESTING as the screen.	xt, the user can select from ONS file (#62.5) which have BB
3	DATE/TIME Multiple	E UNIT RELOCATION (Subfile 65.(D3) DATE/TIME
	These are another.	e dates/times the unit is reloc	cated from one location to
	EXAMPLE:	From blood bank to surgery or	from surgery to blood bank.
	.01 DATE	/TIME UNIT RELOCATION	DATE (PM=Exact date (with month and day) required, time allowed/ and echo the answer; allows dates up to the current time)
	Date from This	/time the unit is relocated fr blood bank to surgery or from is a multiple entry field but	om one location to another,ex. surgery to blood bank. only asked once
	.02 INSP	ECTION	SET `S' FOR SATISFACTORY; `NI' FOR INSATISFACTORY:
	Inte imme	rpretation of unit inspection diately before issue/relocatio	for color and appearance n.
	.03 TECH Pers	INSPECTING on inspecting unit	POINTER TO NEW PERSON FILE(#200)

	Field Name		
	Help Prompt		
Field#	Desc	cript ion	Data Type (PM=Pattern Match)
	.04	LOCATION	<pre>FREE TEXT(PM=Any alphanumeric, upper or lower case, punctuation allowed)</pre>
		Entry must be 2-30 characters	
		Location to which unit of blood is	being relocated.
	.05	ISSUED TO/REC'D FROM ANSWER MUST BE 2-30 CHARACTERS IN L Person taking unit from or returnin	FREE TEXT ENGTH g unit to the blood bank.
	.06	FOR PATIENT	FREE TEXT
		ANSWER MUST BE 2-30 CHARACTERS IN L The patient the unit of blood is be	ENGTH ing relocated for.
	.07	VA PATIENT NUMBER Internal entry # in the patient (#2 If the patient is an entry in the P number	POINTER TO PATIENT FILE (#2)) file ATIENT file (#2) the pointer
1 1	סמפדת	STETON	C E T
4.1	DISPO	SITION	<pre>SET 'R' FOR RETURN TO SUPPLIER; 'T' FOR TRANSFUSE; 'D' FOR DISCARD; 'S' FOR SEND ELSEWHERE; 'M' FOR MICROBIOLOGY/ RESEARCH; 'MO' FOR MODIFY;</pre>
			`SA' FOR SALVAGED
	Fina	al disposition of the unit	
4.2	DISPO Enter	SITION DATE only past or present Date/time	DATE/TIME (PM=Exact date (with month and day) required, time allowed/ and echo the answer; allows dates up to the current time)
	Date	of final disposition	
4.3	DISI Pers	POSITION ENTERING PERSON son entering final disposition	POINTER TO NEW PERSON FILE(#200)
4.4	POOI	LED/DIVIDED UNITS	FREE TEXT (PM=1 or more numeric)
	Ente	er number of units in pool enclosed :	in parentheses; ex. (5).
	Numk bloc	per of units in pool OR number of al: od/blood component has been divided	iquots into which a unit of
4.5	SHII MUST ENTH	? TO C BE 2-68 CHARACTERS IN LENGTH, CAN U RIES WITH BB DISP SCREEN.	FREE TEXT JSE LAB DESCRIPTION FILE
	If u of f	unit is returned to sender or shipped Eacility where sent.	d elsewhere enter name/location
	NOTE the	E: In addition to free text, the user LAB DESCRIPTIONS file (#62.5) which	r can select from entries in have BB DISP as the screen.

Field#	Field Name Help Prompt Description	Data Type (PM=Pattern Match)	
5	DISPOSITION COMMENT (Subfile 65.06)		
	Multiple These are final disposition comments.		
	.01 DISPOSITION COMMENT ANSWER MUST BE 1-80 CHARACTERS IN L FILE ENTRIES WITH BB DISP SCREEN Final disposition comments.	FREE TEXT ENGTH, CAN USE LAB DESCRIPTION	
	NOTE: In addition to free text, the in the LAB DESCRIPTIONS file (#62.5 screen.	e user can select from entries 5) which have BB DISP as the	
6.1	PATIENT TRANSFUSED Enter patient name Name of patient transfused	FREE TEXT (see note)	
	NOTE: The data is stored as free text; he data entry routine allows only entr file (#2).	however, the input template for ies selected from the PATIENT	
6.12	PARENT FILE This is the file whose demographic data transfused.	COMPUTED is stored for the patient	
6.15	TRANSFUSED PATIENT ABO This is the transfused patient's ABO.	COMPUTED	
6.16	TRANSFUSED PATIENT RH This is the transfused patient's Rh type.	COMPUTED	
6.2	PHYSICIAN ANSWER MUST BE 2-30 CHARACTERS IN LENGTH Physician of patient transfused	FREE TEXT	
	NOTE: The data is stored as free text; ho pulled from the current entry in the PATI is displayed as the default. If no data e enter data.	owever, the data is generally ENT File (#2), field .104 and exists, the user is required to	
6.3	TREATING SPECIALTY	FREE TEXT(PM=Any alphanumeric, upper or lower case, punctuation allowed; may not be all numeric or start with punctuation)	
punctuation) ANSWER MUST BE 3-30 CHARACTERS IN LENGTH			
	Treating specialty to which the patient unit was transfused.	is assigned at the time the	
	NOTE: The data is stored as free text; however, the data is generally pulled from the current entry in the PATIENT file (#2), field .(#1043 and is displayed as the default. If no data exists the user is required to enter data.		

	Field Name Help Prompt	
Field#	Description	Data Type (PM=Pattern Match)
6.4	TRANSFUSION RECORD NUMBER	NUMERIC(PM=contains 6 or more numerics)
	TYPE A NUMBER BETWEEN 1 AND 9999999 Internal number in subfile 63.085 TRANSI	FUSION RECORD
	NOTE: This field is not editable. It is	created by software.
6.5	TRANSFUSION REACTION	SET `1' FOR YES; `0' FOR NO;
	If patient had a transfusion reaction en Answer 'YES' if the patient experienced result of transfusion of designated bloc	nter `Y' an adverse reaction as a od/blood component
6.6	PROVIDER NUMBER If the physician is an entry in the New is stored here.	POINTER TO NEW PERSON FILE (#200) Person file the pointer number
6.7	TREATING SPECIALTY NUMBER	POINTER TO FACILITY TREATING SPECIALTY FILE (#45.7)
	Internal entry # in treating specialty f If the treating specialty is an entry in the pointer number is stored here.	file n the treating specialty file,
6.8	TRANSFUSION REACTION TYPE	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
	Indicates the type of transfusion react: Selects transfusion reaction type	ion
	NOTE: Choices are limited to those with REACTION	the SCREEN = TRANSFUSION
7	TRANSFUSION COMMENT (Subfile 65.07) Multiple	
	These are comments regarding the transfu including whether only a part of the un reason(s).	usion or specific unit, it was transfused and the
	.01 TRANSFUSION COMMENT Comments regarding the transfusion including whether only a part of th reason(s).	FREE TEXT of the specific unit, e unit was transfused and the
	ANSWER MUST BE 1-80 CHARACTERS IN L	ENGTH
	NOTE: In addition to free text, the user the LAB DESCRIPTIONS file (#62.5) which	r can select from entries in have BB TRANS as the screen.
8	RESTRICTED FOR The patient indicated here is the only o this unit.	FREE TEXT one who may be transfused with
	NOTE: The data is stored as free text; h the data entry routine allows only entry file (#2).	nowever, the input template for ies selected from the PATIENT

	Field	Name	
	Help :	Prompt	
Field#	Descr:	1pt1on	Data Type (PM=Pattern Match)
8.1	POS/I	NCOMPLETE SCREENING TESTS	SET `1' FOR YES; `0' FOR NO;
	If au antib trans	tologous donor has a positive syph ody test YES is entered. This flag fuse this unit to anyone other that	ilis serology, HBsAg, or HIV is intended to warn NOT to n the DONOR!
8.3	DONAT	ION TYPE	SET `A' FOR AUTOLOGOUS; `D' FOR DIRECTED;
	This unit.	field indicates which type of dona	tion will be used to log this
9	MODIF Multi	IED TO/FROM (Subfile 65.091) ple	POINTER TO BLOOD PRODUCT FILE (#66)
	TYPE If un new u and w .001 TYPE A num	A NUMBER BETWEEN 0 AND 99999 it is modified identifies what prov nit ID's. If unit is a pool identia hat units are in the pool. NUMBER A WHOLE NUMBER BETWEEN 1 AND 20. ber from 1 to 20.	ducts are made and what are the fies what product was pooled NUMBER(PM=1 or more numerics)
	.01	MODIFIED TO/FROM	POINTER TO BLOOD PRODUCT
		If unit is modified, identifies what are the new units by ID#. If unit product was pooled and what units Products allowed to be made from the second	FILE (#66) hat products are made and what is a pool, identifies what are in the pool. inventory.
		NOTE: Selections are limited based BLOOD PRODUCT file (#66) in the Mo specific component being modified	d on the file setup in the ODIFIED TO/FROM field. For the
	.02	UNIT ID ANSWER MUST BE 2-12 CHARACTERS IN If the unit is to be modified, the entered here. If the unit is a mod are entered.	FREE TEXT LENGTH e unit ID of the new unit is dified unit, the old unit ID's
	.03	FROM/TO	SET `1' FOR FROM; `2' FOR TO;
		If entry is from another unit, `1	' is entered.
		If entry is to become or be part of entered. Several of the entries mapool and each entry will have a ' be modified to another unit and the entered.	of another unit, a `2' is ay have been entered to form a 1' entered. Then the pool may hen the entry will have a `2'
		NOTE: This data is routinely enter software.	red automatically by the

	Field Name	
	Help Prompt	
Field#	Description	Data Type (PM=Pattern Match)
10	ABO INTERPRETATION	SET `A' FOR A; `B' FOR B; `O' FOR O; `AB' FOR AB; `ND' FOR NOT DONE;
	Interpretation of ABO testing	
10.2	TECH ENTERING-ABO INTERP Person performing ABO testing	POINTER TO NEW PERSON FILE(#200)
10.3	ABO TESTING COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH Comment related to ABO testing	FREE TEXT H
	NOTE: In addition to free text, the user the LAB DESCRIPTIONS file (#62.5) which	r can select from entries in have BB TESTING as the screen.
10.4	ABO MOVED FROM DONOR FILE	SET `1' FOR YES;
11	RH INTERPRETATION Interpretation of Rh testing	SET `NEG' FOR NEGATIVE; `POS' FOR POSITIVE; `ND' FOR NOT DONE;
11.2	TECH ENTERING-RH INTERP Person performing Rh testing	POINTER TO NEW PERSON FILE(#200)
11.3	RH TESTING COMMENT ANSWER MUST BE 1-80 CHARACTERS IN LENGTH Comment related to Rh testing	FREE TEXT I
	NOTE: In addition to free text, the user the LAB DESCRIPTIONS file (#62.5) which	r can select from entries in have BB TESTING as the screen.
11.4	RH MOVED FROM DONOR FILE	SET 1' FOR YES;
15	DATE RE-ENTERED (Subfile 65.15) Multiple	
	Re-entry date of the unit in the file	
	NOTE: Data for this multiple is entered It is not editable.	automatically by the software.

	Field Name		
	Help Prompt		
Field#	Desc	ription	Data Type (PM=Pattern Match)
	.01	DATE RE-ENTERED	DATE/TIME (PM=Exact date (with month and day) required, time allowed and echo the answer)
		Re-entry date of the unit in the fi entering the unit in the INVENTORY	le elsewhere enter the date re- file.
	.02	PREVIOUS DISPOSITION The previous disposition	SET `R' FOR RETURNED TO SUPPLIER; `S' FOR SENT ELSEWHERE;
	.03	PREVIOUS DISPOSITION DATE	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
		The date of the previous dispositio	n.
	.04	PREVIOUS DISP ENTERING PERSON POINTER TO NEW PERSON FIL The name of the person entering the previous disposition	
	.05	PREVIOUS SHIPPING INVOICE FREE TEXT ANSWER MUST BE 2-10 CHARACTERS IN LENGTH The previous shipping invoice.	
	.06	REVIOUS RECEIVING INVOICE FREE TEXT NSWER MUST BE 2-10 CHARACTERS IN LENGTH ne previous receiving invoice.	
	.07	PREVIOUS LOG-IN PERSON POINTER TO NEW PERSON FILE	
	.08	PREVIOUS DATE LOGGED-IN DATE (PM=Exact date (with Date of the previous log-in.month and day) required, time allow and echo the answer)	
	.09	PREVIOUS SHIP TO ANSWER MUST BE 2-68 CHARACTERS IN L The name of the previous ship.	FREE TEXT ENGTH
16	PEDI	ATRIC ALIQUOT MADE (Subfile 65.16)	
	.01	PEDIATRIC ALIQUOT MADE	Field Not in Use
	.02	VOLUME (ml)	Field Not in Use

	Field Name		
Field#	Desc	prompt cription	Data Type (PM=Pattern Match)
60	RBC Mult	ANTIGEN PRESENT (Subfile 65.04) tiple	POINTER
	.01	RBC ANTIGEN PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)
		RBC Antigen tested Enter ANTIGEN Antigen(s) present on red blood cel	ls of the unit (if applicable)
	NOTE	: Choices are restricted to those fo	or which the SCREEN = AN
	.02	RBC ANTIGEN PRESENT COMMENT	Field Not in Use
70	RBC Mult	ANTIGEN ABSENT (Subfile 65.05) Liple	
	.01	RBC ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)
		Antigen(s) absent on red blood cell	s of the unit (if applicable)
		NOTE: Choices are restricted to those	se for which the SCREEN = AN
	.02	RBC ANTIGEN ABSENT COMMENT	Field Not in Use
80	HLA Mult SELE	ANTIGEN PRESENT (Subfile 65.08) Liple ECTS HLA ANTIGEN	POINTER
	.01	HLA ANTIGEN PRESENT	POINTER TO FUNCTION FIELD
		HLA antigen(s) present on the approp Selects HLA antigens	priate cells
		NOTE: Choices are restricted to those	se for which the SCREEN = HL
	.02	HLA ANTIGEN PRESENT COMMENT	Field Not in Use
90	HLA	ANTIGEN ABSENT (Subfile 65.09) Multiple	POINTER
	.01	HLA ANTIGEN ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)
		HLA antigen(s) absent on the approp	riate cells
		NOTE: Choices are restricted to those	se for which the SCREEN = HL
	.02	HLA ANTIGEN ABSENT COMMENT	Field Not in Use

	Fiel	.d Name	2				
	Help	Prom <u>p</u>	ot				
Field#	Desc	riptic	n	Data Type (PM=Pattern Match)			
91	CMV ANTIBODY			SET			
				`0' FOR NEG;			
				'1' FOR POS;			
121	DONC	R CELI	LS+ANTI D(slide rgt)	Field Not in Use			
122	DONC	R CELI	LS+RH CTRL(slide rgt)	Field Not in Use			
123	DONC	R CELI	S+ANTI D (37)	Field Not in Use			
124	DONC	R CELI	S+RH CTRL (37)	Field Not in Use			
125	DONC	R CELI	LS+ANTI D (AHG)	Field Not in Use			
126	DONC	OR CELI	LS+RH CTRL (AHG)	Field Not in Use			
127	DONC	R CELI	LS+ANTI D (AHG) CC	Field Not in Use			
128	DONC	R CELI	LS+RH CTRL CC	Field Not in Use			
141	DONC	R CELI	JS+ANTI A(slide)	Field Not in Use			
142	DONC	R CELI	LS+ANTI B(slide)	Field Not in Use			
143	DONC	OR CELI	LS+ANTI A,B(slide)	Field Not in Use			
144	DONC	R PLAS	SMA+A1 CELLS	Field Not in Use			
145	DONC	OR PLAS	SMA+B CELLS	Field Not in Use			
200	DIRE	CT AHO	G(BS)	Field Not in Use			
500	TESI	PROCE	EDURE (Subfile 65.3)	POINTER			
	Mult This	iple field	d contains the test performed of	on this unit.			
	.01	TEST/	PROCEDURE	POINTER TO LABORATORY TEST			
		m1. '		FILE (#60)			
		This	HIS LIELD CONTAINS THE TEST PERIORMED ON THIS UNIT.				
		Usea	to keep track of IESI/PROCEDUR	ES IOF WALD WORKIOad.			
		Serec	ts only blood bank subscripted	lests.			
	1	COMPL	ETE DATE/TIME (Subfile 65.31)	DATE			
		The c	ompletion date/time of the tes	t/procedure.			
		.01	COMPLETE DATE/TIME	DATE(PM=Exact date			
				WKLD workload flag (with month			
				and day) and time			
				required and echo the answer;			
				allows dates up to the			
				current time)			
		.02	TECH The name of the technician co	POINTER TO NEW PERSON FILE(#200) mpleting the test/procedure.			
		.03	INSTITUTION	POINTER TO INSTITUTION FILE (#4)			
			The name of the institution f	rom the Institution file.			
		.04	MAJOR SECTION The name of the major section	POINTER TO ACCESSION FILE (#68) from the Accession file.			
		.05	SUBSECTION The name of the subsection fr	POINTER TO ACCESSION FILE (#68) om the Accession file			

	Field	Name		
	Help	Prompt		
Field#	Descr	iption		Data Type (PM=Pattern Match)
	-	1 WKLD	CODE (Subfile 65.311)	POINTER
		Mult The	iple name of the workload code	e from the WKLD code file
		.01	WKLD CODE	POINTER TO WKLD CODE FILE (#64)
		.02	WKLD CODE COUNT Type a Number between 0 a The count of the workload	NUMBER and 999, O Decimal Digits. d code entry.
		.03	WKLD CODE COUNTED	SET `1' FOR YES; `0' FOR NO;
			A set of code of yes or a counted.	no, whether the workload was
999	DATA Multi	CHANGE DAT	IE (Subfile 65.099) the report value was chang	DATE ged
	.01 I	DATA CHANG	E DATE	DATE/TIME (PM=Exact date (with month and day) required, time allowed and echo the answer)
	-	This field	contains the date the re	eported value was changed
	.02 I	PERSON CHA	NGING DATA	FREE TEXT
	1	ANSWER MUS	T BE 2-30 CHARACTERS IN L	ENGTH
		This field	contains the person that	alter the reported value
	.03 I 2	DATA ELEME ANSWER MUS This field	NT T BE 1-30 CHARACTERS IN L indicated what result na	FREE TEXT ENGTH ume the data was altered.
	.04 (//	OLD VALUE ANSWER MUS This field	T BE 1-30 CHARACTERS IN L contains the value befor	FREE TEXT ENGTH re it was altered.
	.05 1 2	NEW VALUE ANSWER MUS This field	T BE 1-30 CHARACTERS IN L contains the value after	FREE TEXT ENGTH f it was altered.

2. BLOOD INVENTORY file (#65) Data Copied from Original Unit

The BLOOD INVEVTORY file (#65) data are copied from Original Unit and entered in the BLOOD INVENTORY file (#65) for New Unit upon Unit Modification.

File 65				Data
Field# .02 .03 .07 .08 .1	Field Name SOURCE INVOICE # ABO GROUP RH TYPE COST			Copied/Entered Assigns Self Assigns 00 Exact Exact Exact
.16	DIVIS	LON		Exact
2	PATIE	NT XMATCHI	ED/ASSIGNED (Subfile 65.01)	NA
	.01	PATIENT 2	XMATCHED/ASSIGNED	*Exact if unit is assigned
	.012	PARENT F	ILE	NA- Computed field
	.02	DATE/TIM	E UNIT ASSIGNED	*Exact if unit is assigned
	.03	LAST SPE	CIMEN DATE XMATCHED	*Exact if unit is assigned
		1 BLOOD	SAMPLE DATE/TIME (Subfile 65.	02) NA
		.01	BLOOD SAMPLE DATE/TIME	*Exact if unit is assigned
		.02	TREATING SPECIALITY	*Exact if unit is assigned
		.03	PHYSICIAN*	Exact if unit is assigned
		.04	XMATCH RESULT*	Exact if unit is assigned
		.05	XMATCH TECH	*Exact if unit is assigned
		.06	PATIENT SAMPLE ACC #	*Exact if unit is assigned
		.07	TREATING SPECIALTY NUMBER	*Exact if unit is assigned
		.08	PROVIDER NUMBER	*Exact if unit is assigned
		.09	DATE/TIME CROSSMATCHED	*Exact if unit is assigned

File 65 Field#	Field Name	Data Copied/Entered
3	CROSSMATCH COMMENT (Subfile 65.0913)	NA
	.01 CROSSMATCH COMMENT	*Exact if unit is assigned
8	RESTRICTED FOR	Exact
8.1	POS/INCOMPLETE SCREENING TESTS	Exact
8.3	DONATION TYPE	Exact
60	RBC ANTIGEN PRESENT (Subfile 65.04)	NA
	.01 RBC ANTIGEN PRESENT	Exact
70	RBC ANTIGEN ABSENT (Subfile 65.05)	NA
	.01 RBC ANTIGEN ABSENT	Exact
80	HLA ANTIGEN PRESENT (Subfile 65.08)	NA
	.01 HLA ANTIGEN PRESENT	Exact
90	HLA ANTIGEN ABSENT (Subfile 65.09)	NA
	.01 HLA ANTIGEN ABSENT	Exact
91	CMV ANTIBODY	Exact

*Exact if unit is "assigned" at the time the unit is modified and data exists for the original unit.

Software Limitations

Functionality	Description of Software Limitations
Inventory- Receipt, Shipment and Discard of Units	No automatic quarantining of in-date units based on donor look back procedures. No provision for documenting approval of autologous products repeatedly reactive for HIV-1 Antigen. No provision for tracking specific method of disposal of discarded units.
	human tissue (other than blood and blood components) and derivatives.
Inventory- Confirmation testing of units	No provision for test result interpretation based on actual testing results, (e.g. evaluation of reactions of antisera). Manual entry of ABO/Rh confirmation testing interpretations (rechecks).
Inventory- Modification of units	No system of blood component quality control records. No provision for evaluation of ABO compatibility of units being modified into a pooled product. No system for recording of lot #s of filters used in the preparation of leukocyte reduced blood products and/or solutions used in the preparation of washed, frozen, deglycerolized and rejuvenated red blood cells. Partial system for evaluating mutually exclusive components.
Inventory - Issue/relocation of units for transfusion	Manual entry of test result interpretations for all required testing. Manual entry of ABO/Rh confirmation testing. No provision for generating the electronic equivalent of the Blood Component Requisition (SF518). Manual entry of pretransfusion compatibility testing interpretations. No provision of a separate methodology for emergency release of units. No provision for evaluation of time elapsed criteria for return/reissue of units. No electronic record created for relocation from the Blood Bank which is not completed because unit inspection is found to be unsatisfactory. No provision for documenting medical director approval for transfusion of units after the expiration date/time. No provision for documenting storage and issue of human tissue.

Functionality	Description of Software Limitations
Inventory - Phenotyping of units	Manual entry of test result interpretations.
Inventory- Release of units to stock/available inventory	No provision of an electronic donation record for those autologous units drawn on-site. No automatic provision for the release of units to stock after a specific time.
Inventory - Records	 No system of blood component quality control records. No provision of system of records for actual test results, i.e. manual entry of test results interpretations for all required testing. No provision of indication for emergency issue of uncrossmatched blood. No provision for documenting approval for issue of components which are not ABO/Rh compatible. No provision for documenting approval for issue of components which have expired.

Intended Uses

IU#	Functionality	Description of Intended Uses
I1	Inventory - General	Provision of a unique cumulative unit history record for each individual blood component based on the data elements detailed above for the BLOOD INVENTORY file (#65).
12		Maintenance of patient record confidentiality for test results/transfusion histories by providing different levels of security access such that the type of data access can be defined by individual user.
13	Inventory - General	Site specific control to set up the entries in the BLOOD PRODUCT file (#66) for component specific requirements and algorithms to reflect the facility operating procedures. See Section IX for a listing of the data elements and the descriptions of their use.
I4	Inventory - General	Record updates immediately upon data entry.
15	Inventory - General	Limited simultaneous access by multiple terminals/ users to the same unit record for purposes of data entry in specified options.
16	Inventory - General	Accommodation of the use of a bar code reader for entry of the unit ID
I7	Inventory - General	Accommodation of the use of a bar code reader for entry of the component (blood product code)
I8	Inventory - General	Accommodation of the use of a bar code reader for entry of the expiration date
19	Inventory - General	Limited access to only units assigned to the same division as the user, based on a comparison of the division assigned to the unit and the division currently assigned to the user.
I10	Inventory - General	Tracking of the person entering test results and/or performing various steps in the process, (i.e., the person entering the computer).
I11	Inventory - General	Tracking of changes in verified data for specific data elements defined for the BLOOD INVENTORY file (#65)- see Section IX for listing by data element
I12	Inventory - General	Tracking of verified data entered for specific data elements defined for the BLOOD INVENTORY file (#65) and LAB DATA file (#63) when data is entered/edited via the supervisory edit options requiring a higher level of security.
I13	Inventory-Receipt, Shipment and Discard of Units	Entry of an exact date and time for the date/time received.
I14	Inventory-Receipt, Shipment and Discard of Units	Check of the existing entries in BLOOD INVENTORY file (#65) during the entry of a unit ID to prevent entry of a duplicate unit ID of the same component.

IU#	Functionality	Description of Intended Uses
I15	Inventory-Receipt, Shipment and Discard of Units	Ability to designate the appropriate DONATION TYPE of the unit for autologous and directed donor units being entered. Component selected has an "A" or "D" in the AUTOLOGOUS/DIRECTED field (#.25) in the BLOOD PRODUCT file (#66).
I16	Inventory-Receipt, Shipment and Discard of Units	For autologous and directed donor units being entered, required entry of a patient name in the RESTRICTED FOR field (#8) of the BLOOD PRODUCT file (#66). Component selected has an "A" or "D" in the AUTOLOGOUS/DIRECTED field (#.25) in the BLOOD PRODUCT file (#66).
I17	Inventory-Receipt, Shipment and Discard of Units	For autologous and directed donor units being entered, ability to enter data in the POS/INCOMP. SCREENING TESTS field (#8.1) if appropriate based on the results of the required TTD marker testing. (Component selected has an "A" or "D" in the AUTOLOGOUS/DIRECTED field (#.25) in the BLOOD PRODUCT file (#66)).
I18	Inventory-Receipt, Shipment and Discard of Units	Limited ability to re-enter units into inventory, i.e., only units which can be re-entered are those with dispositions of 'S' (sent elsewhere) or 'R' (returned to supplier).
119	Inventory-Receipt, Shipment and Discard of Units	For units that are re-entered, transfer of the original log-in and disposition data to appropriately designated fields to allow tracking of the original data Subfile (#65.15).
I20	Inventory-Receipt, Shipment and Discard of Units	Ability to enter a time in the Expiration Date field (#.06).
I21	Inventory-Receipt, Shipment and Discard of Units	Identification of potentially biohazardous units based on a notation on the shipping invoice for units which were released from the donor module with incomplete results, i.e., unit has a "YES" in the POS/INCOMP. SCREENING TESTS field (#8.1), in an effort to ensure appropriate handling.
122	Inventory - Receipt, Shipment and Discard of Units	Site specific control of the text that appears on the shipping invoice. (SHIPPING INVOICE entry in the LAB LETTER file (#65.9).
123	Inventory-Receipt, Shipment and Discard of Units	Inclusion of information on the shipping invoice to allow recording of information on shipping temperatures based on the wording entered in for in the LAB LETTER file (#65.9) for SHIPPING INVOICE.
I24	Inventory-Receipt, Shipment and Discard of Units	Restricted selection of blood components to those in BLOOD PRODUCT file (#66)with suppliers, etc.
125	Inventory-Receipt, Shipment and Discard of Units	Evaluation of the validity of the expiration date based on the entry in the MAXIMUM STORAGE DAYS field for that blood component in the BLOOD PRODUCT file (#66).

IU#	Functionality	Description of Intended Uses
I26	Inventory-Receipt, Shipment and Discard of Units	When editing data on a pooled product, restricted access to those units for which the component is defined as a pooled product based on the entry in the Pooled Product field (#.27) in the BLOOD PRODUCT file (#66) (i.e., requires a higher level of security access).
127	Inventory-Receipt, Shipment and Discard of Units	Use of an average volume for the component for the unit volume, based on the entry in the Volume field (#.1) in the BLOOD PRODUCT file (#66) for that specific blood component.
128	Inventory-Receipt, Shipment and Discard of Units	Use of the entry in the COST field (#.02) for the specific SUPPLIER for the specific component in the BLOOD PRODUCT file (#66) to record of the cost of the unit.
129	Inventory-Receipt, Shipment and Discard of Units	Adjustment in the cost of units which are "RETURNED TO SUPPLIER" by entering data into the RETURN CREDIT field (#.14) for the unit.
130	Inventory-Receipt, Shipment and Discard of Units	Transfer of a unit to a different DIVISION within a multidivisional facility, providing the numeric portion of the parent institution in the INSTITUTION file (#4) for the new DIVISION matches that of the existing entry in the DIVISION field (#.16).
I31	Inventory-Receipt, Shipment and Discard of Units	No entry of future disposition dates.
132	Inventory - General	Site specific control of standardized canned comments which are accessible during the data entry of disposition information for units with a DISPOSITION 'TRANSFUSE' or 'MODIFY' (entries in the LABORATORY DESCRIPTIONS file (#62.5) for which the SCREEN = BB DISP).
133	Inventory-Receipt, Shipment and Discard of Units	Ability to edit verified information relating to the receipt (log-in) for a specific unit ID. (Requires a higher level of security access)
I34	Inventory-Receipt, Shipment and Discard of Units	Ability to edit verified information relating to the disposition of a specific unit ID. (Requires a higher level of security access)
135	Inventory-Receipt, Shipment and Discard of Units	Ability to edit verified information relating to the contents of a pooled product for a specific unit ID. (Requires a higher level of security access)
136	Inventory - Confirmation testing of units	For units received from an outside facility or created through modification of other units, creation of a queue which includes units on the Inventory ABO/Rh testing worklist report if the blood component has a "yes" in the CONTAINS RED CELLS field (#.19) in the BLOOD PRODUCT file (#66).

IU#	Functionality	Description of Intended Uses
I37	Inventory - Confirmation	Comparison of the confirmatory (recheck) test results
	testing of units	to the unit log-in information and display of a warning
		message if results do not agree.
I38	Inventory - Confirmation	Limited access to those units assigned to the same
	testing of units	division as the user if data entry is done by unit (not if
	_	done by batch).
I39	Inventory - Confirmation	Testing worksheet which includes unit #s of units to be
	testing of units	tested for use in manually recording actual test results.
I40	Inventory - Confirmation	Site specific control of the text which appears on the
	testing of units	Inventory ABO/Rh testing worksheet generated by the
		option [LRBLIW]. (INVENTORY WORKSHEET entry
		in the LAB LETTER file (#65.9)).
I41	Inventory - Confirmation	Site specific control of standardized canned comments
	testing of units	which are accessible during the data entry of
		confirmatory testing (rechecks) on units (entries in the
		LAB DESCRIPTIONS file (#62.5) for which the
7.40		SCREEN = BB TESTING).
142	Inventory - Modification of	Creation of a new entry in the INVENTORY file (#65)
	Units	for each new blood component created and assignment
		of a final disposition to the original unit being
1/2	Inventory Medification of	Attachment of appropriate pieces of data to the new
143	Lipite	upit created when a upit is modified see Section V for
	Clifts	a listing by data element
I 44	Inventory - Modification of	Determination as to whether the ABO/Rh confirmatory
	Units	testing information should be attached to the new unit
		created based on the entry in the RETYPE AFTER
		PREPARATION field for the component in the BLOOD
		PRODUCT file (#66).
I45	Inventory - Modification of	Placement of unit in queue for inclusion on the
	Units	Inventory ABO/Rh testing worklist if the component
		created has a "YES" in the RETYPE AFTER
		PREPARATION field in the BLOOD PRODUCT file
		(#66).
I46	Inventory - Modification of	Assignment of the ABO of a pool based on the ABO of
	Units	the first unit in the pool.
147	Inventory - Modification of	Assignment of the Rh of a pool such that regardless of
	Units	the order in which the units are pooled, the pool will be
		deemed Rh positive if any of the units in the pool were
140	The sector Marticles (Rn positive.
148	Inventory - Modification of	If a product is divided, calculation of the number of
	Units	and and entry of the data in the DOOLED/DU/IDED LINITS field (#4.4) for
		the original unit
1/0	Inventory - Modification of	Exclusion of ability to modify an autologous component
143	Inventory - would attor of	to a non autologous component if an entry exists in the
		POS/INCOMP_SCREENING TESTS field (#8.1)
		indicating that testing for transfusion transmitted
		disease markers is incomplete or positive.

IU#	Functionality	Description of Intended Uses
150	Inventory - Modification of Units	Identification of units that are potentially unsuitable for modification based on an entry in the POS/INCOMP. SCREENING TESTS field (#8.1) indicating that the unit was released from the donor module with incomplete results.
151	Inventory - Modification of Units	Restricted selection of component choices to those defined in the MODIFIED TO/FROM field (#.01) in the BLOOD PRODUCT file (#66) for the specific component of the unit being modified.
152	Inventory - Modification of Units	Determination of whether more than one new unit can be created from a unit being modified based on the entry in the NOT ONLY ONE ALLOWED field (#.02) in the BLOOD PRODUCT file (#66) for the specific component of the unit being modified.
153	Inventory - Modification of Units	Prevents multiple modifications to the same unit by excluding selection of units which already have a disposition entered.
154	Inventory - Modification of Units	Requirement for a new unit ID for units being created.
155	Inventory - Modification of Units	If a unit is being divided/split into other components, evaluation of the sum of the new unit volumes to make sure the sum does not exceed the volume of the original unit.
156	Inventory - Modification of Units	Calculation of the expiration date of the unit being created based on the time of the data entry and the entry in the Days Left field (#.11) of the BLOOD PRODUCT file (#66). If the entry in the field is a whole number, the calculation will be a date only; whereas, if the entry is a decimal, the calculation will be in the format of a date and time.
157	Inventory - Modification of Units	Evaluation of the calculated expiration date of the new unit against the expiration date of the unit being modified and displays alert message. If the calculated expiration date of the new unit exceeds the original expiration date, or in the case of a pooled product, the original expiration date of any of the units in the pool.
158	Inventory - Modification of Units	No entry of future disposition dates.
159	Inventory - Modification of Units	If a pediatric component is being created, restricted unit selection to those of appropriate age based on the entry in the MAX AGE FOR PEDIATRIC USE field (#.21) in the BLOOD PRODUCT file (#66).for the component of the unit being modified.
160	Inventory - Modification of Units	If a pediatric component is being created, identification of low volume units, i.e., those with a volume < 150ml. and displays the volume.
I61	Inventory - Modification of Units	For pediatric units, calculation of the volume of the unit being created using an algorithm based on the weight entered and the specific gravity of the component as defined in the BLOOD PRODUCT file (#66).

IU#	Functionality	Description of Intended Uses
162	Inventory - Modification of Units	If a pediatric unit is being created, assignment of a final disposition of 'MODIFIED' to units with 0ml remaining volume after the unit has been modified, (i.e., divided into aliquots).
163	Inventory - Modification of Units	Site specific control to determine whether the user should be asked for a bag lot number during data entry of unit modification information for use in future FileMan search requests. (Ask Bag Lot # field (#.28) in the BLOOD PRODUCT file (#66)).
I64	Inventory - Issue/relocation of units for transfusion	Display of patient and unit information on the CRT for comparison with the label generated by the Unit Caution tag labels [LRBLILA] option after the necessary pretransfusion testing has been completed.
165	Inventory - Issue/relocation of units for transfusion	Display of an alert message for any patients selected who have autologous and/or directed components in inventory, based on a match with the name entered in the Restricted For field (#8) for the unit(s).
166	Inventory - Issue/relocation of units for transfusion	Display of a warning message if the unit selected has been double crossmatched and is still assigned to another patient at the time the unit is being issued for transfusion.
167	Inventory - Issue/relocation of units for transfusion	Display of an alert message for any patients selected who have an entry in either the ANTIBODIES IDENTIFIED or the BLOOD BANK COMMENTS field (#.01) in the LAB DATA file (#63).
168	Inventory - Issue/relocation of units for transfusion	Limited selection of units for issue to those units, which have a current status of 'assigned' and are assigned to the patient specified.
169	Inventory - Issue/relocation of units for transfusion	For patients with an entry in the ANTIBODIES IDENTIFIED field (#.075), evaluation of the unit phenotyping of allogeneic (homologous) units against each clinically significant patient antibody & prevents issue if unit phenotyping s not appropriate, i.e., for each entry in the ANTIBODIES IDENTIFIED field (#.076), there must be a corresponding entry in the RBC ANTIGEN ABSENT field (#.5) of the unit.
170	Inventory - Issue/relocation of units for transfusion	Prior to its issue for subsequent transfusion, evaluation of the crossmatch requirements in the BLOOD PRODUCT file (#66) for the specific component of the unit selected to determine whether crossmatch results must be entered and prevents issue if a crossmatch is required and no results have been entered for the unit.
171	Inventory - Issue/relocation of units for transfusion	Use of an algorithm to prevent issue if no recheck results are entered based on component specific parameters defined the BLOOD PRODUCT file (#66), (i.e., if CONTAINS RED CELLS = YES, an ABO recheck is required, and if unit is Rh negative, the Rh recheck is also required).

IU#	Functionality	Description of Intended Uses	
172	Inventory - Issue/relocation of units for transfusion	Prevents issue of unit if the inspection is entered as unsatisfactory for that specific relocation from any previous relocations of that unit.	
173	Inventory - Issue/relocation of units for transfusion	Evaluation of the expiration date of unit and displays a warning message if unit is expired when compared to the current time.	
I74	Inventory - Issue/relocation of units for transfusion	No issue of the unit if the component is one for which there is an entry of "YES" in the Modified Before Release field (#.14) in the BLOOD PRODUCT file (#66).	
175	Inventory - Issue/relocation of units for transfusion	Data validation check to ensure that the unit relocation date/time is not prior to the date/time the unit was assigned to the patient.	
176	Inventory - Issue/relocation of units for transfusion	Prevents entry of a future relocation date/time.	
177	Inventory - Issue/relocation of units for transfusion	Restricted relocation of units to standard locations within the same associated division based on the entries in the HOSPITAL LOCATION file (#44) <i>unless</i> user enters a non-standard location and overrides the check.	
178	Inventory - Issue/relocation of units for transfusion	Ability to edit verified information relating to the issue/relocation of a specific unit ID. (Requires a higher level of security access)	
179	Inventory - Phenotyping of units	Use of a standardized coding system, i.e., SNOMED, for identifying both RBC and HLA antigen typings on units.	
180	Inventory - Phenotyping of units	Ability for the site to define which entries in FUNCTION FIELD file (#61.3) are accessible during the data entry of unit RBC phenotyping results (entries in File #61.3 for which the SCREEN = AN).	
I81	Inventory - Phenotyping of units	Site specific control of the transfusion criteria regarding the RBC antigen phenotyping of units selected for patient(s) with clinically significant antibody(ies). (CORRESPONDING ANTIGEN entry in the FUNCTION FIELD file (#61.3))	
182	Inventory - Phenotyping of units	Report listing of all units in inventory which have been phenotyped, including all entries for RBC antigens present and absent, for a specified component of a specified ABO/Rh.	
183	Inventory - Phenotyping of units	Data validation check to prevent entry of the same antigen in the RBC Antigen Present field (#.04) and the RBC Antigen Absent field (#.05) for a given unit ID.	
184	Inventory - Phenotyping of units	Donor record in the BLOOD DONOR file (#65.5) updated to reflect any unit phenotyping performed and entered for the donor unit after the unit has been released to the BLOOD INVENTORY file (#65).	

IU#	Functionality	Description of Intended Uses
185	Inventory-Release of units to stock/available inventory	Restricted release of the autologous/directed donor units for allogeneic (homologous) use, i.e., deletion of RESTRICTED FOR information, for units with a 'YES' in the POS/INCOMP. SCREENING TESTS field (#8.1).
186	Inventory-Release of units to stock/available inventory	Restricted release of units from locations other than BLOOD BANK.
187	Inventory - Release of units to stock/available inventory	Site specific control of standardized canned comments that are accessible during the release of crossmatched/assigned units back to available inventory. (entries in the LABORATORY DESCRIPTIONS file (#62.5) for which the SCREEN = BB RELEASE).
188	Inventory- Records	Tracking of unit modification information for both the unit being modified and the unit(s) being created to include data on units MODIFIED TO or MODIFIED FROM as appropriate.
189	Inventory- Records	Use of an algorithm to search the BLOOD INVENTORY file (#65) to look for missing data. See Section IX for a listing of data elements being evaluated.
190	Inventory- Records	On-line storage of unit cumulative history for look- back purposes.
I91	Inventory- Records	Ability to display/print a hard copy of the cumulative unit history.
192	Inventory- Records	Display of selected information on the current status of a unit, i.e., unit ID, component, expiration date, ABO/Rh, patient assigned if currently assigned, date assigned if currently assigned, current location and the date last relocated if unit has ever been relocated.
193	Inventory- Records	Ability to print a hard copy of the cumulative unit history for units entered into the BLOOD INVENTORY file (#65) within a specified date range for which have a final disposition has been entered for use as a permanent record prior to the removal of the unit from the computer system.
194	Inventory - Records	Requirement to use the Print units with final disposition [LRBLRUF] option to print a hard copy of the cumulative unit history in the BLOOD INVENTORY file (#65) in order to purge units for which a final disposition has been assigned. (NOTE: Higher level of security access also required.)
195	Inventory - Management	Report of units which have been tested for CMV antibody and for which results have been entered, allowing user to specify ABO/Rh and whether the report should include CMV Antibody positive or CMV Antibody negative units.

IU#	Functionality	Description of Intended Uses
196	Inventory- Management	Report for a specified range of disposition dates for a specified disposition of units (as long as the disposition selected "TRANSFUSE") and can be used for supervisory or utilization review. The report is sorted by component and includes specified data fields; for most dispositions i.e., unit ID, disposition date, supplier (source), ABO/Rh, date received and disposition comment. If "MODIFY" is selected for the disposition, the report will include the unit ID, disposition date, the component into which the unit was modified and the new unit ID instead.
197	Inventory - Management	Report for a specified component (or all components), for a specified ABO/Rh (or all groups), of units which are available, i.e., are in date and have no final disposition, sorted by component, by ABO/Rh and by expiration date within the ABO/Rh which can be used for checking available inventory or for supervisory or utilization review. Report includes ABO/Rh, unit ID, expiration date, current location, patient assigned is currently assigned, specimen date is appropriate and totals for each ABO/Rh for each component. In addition, if the units autologous or directed, the patient's name is included even if the unit is not currently in the assigned status.
198	Inventory- Management	Report for a specified component (or all components), for a specified ABO/Rh (or all groups), of units which have no final disposition (both indate and outdated), sorted by component, by ABO/Rh and by expiration date within the ABO/Rh which can be used for checking inventory and data entry records. Report includes ABO/Rh, unit ID, expiration date, current location, patient assigned is currently assigned, specimen date is appropriate and totals for each ABO/Rh for each component. In addition, if the unit is autologous or directed, the patient's name is included even if the unit is not currently in the assigned status.
199	Inventory- Management	Report of units in the "assigned" status in chronological order by date/time assigned for use evaluating which units should be canceled/released or for other types of supervisory/utilization review. Report includes the date/time crossmatched (or assigned if component does not require crossmatching), specimen date/time if appropriate, unit ID, ABO/Rh, current location, unit expiration date/time, component abbreviation and patient (name and SSN).

IU#	Functionality	Description of Intended Uses
I100	Inventory- Management	Ability to edit supplier charges for individual units
		before generating costing reports by invoice number or
		by transaction.
I101	Inventory- Management	Ability to enter and/or edit supplier charges for special
		typing charges on individual units before generating
		costing reports for special typing charges.
I102	Inventory- Management	Report of units entered into the BLOOD INVENTORY
		file (#65) for a specified date range, sorted by supplier
		and by invoice # within the supplier for use in verifying
		billing invoices received. Report includes the
		component, invoice #, date/time received, unit ID,
		expiration date, ABO/Rh, cost, disposition if already
		entered, counts, cost subtotals and cost totals.
I103	Inventory- Management	Report of units entered into the BLOOD INVENTORY
		file (#65) for a specified date range, sorted by
		component, then by date received, then by ABO/Rh for
		use in verifying billing invoices received or for a review
		of transactions. Report includes the supplier,
		component, date/time received, invoice #, unit ID,
		ABO/Rh, expiration date, cost, disposition if already
		entered, counts, cost subtotals and cost totals.
		(NOTE: Report differs from the report by invoice
		number in both format and count as the report by
		transaction includes unit modifications done on-site.)
1104	Inventory- Management	Report of all special charges for units entered into the
		BLOOD INVENTORY file (#65) for a specified date
		range, sorted by date/time received, for use in verifying
		billing involces received. Report includes the unit ID,
		component, supplier (source), invoice #, date/time
		received, cost, log-in tech, ABU/Rh, volume and special
1105		Lyping charge.
1105	Inventory- Management	Report detailing the disposition of autologous units
		entered into the BLOOD INVENTORY file (#65) for a
		specified date range, sorted by date received, which
		nave a disposition = 1 RAINSFUSE, for supervisory
		information unit ID # days present in inventory
		(colculated from date received to dispecition date)
		(calculated from date received to disposition date),
		transfused and totals by type of component
T106	Inventory Management	Papert detailing the dispesition of autologous units
1100	mentory-management	antered into the BLOOD INVENTORY file (#65) for a
		specified date range sorted by patient which have a
		disposition TRANSFUSE for supervisory and/or
		utilization review Report includes the nationt
		information component disposition unit ID # days
		present in inventory (calculated from date received to
		disposition date) and totals by type of component

IU#	Functionality	Description of Intended Uses
I107	Inventory- Management	Report of all issues/relocations for a specified date range, sorted by date/time relocation, for use as a semi- permanent record/utilization review or as a quick reference in other clinical lab sections. Report includes the date/time relocation, unit ID, component abbreviation, inspection results, tech performing inspection, person issued to, patient name, location issued to, patient SSN, counts by location and by component, and totals by component.
I108	Inventory- Statistics	Report of tallies for ABO recheck and Rh rechecks entered for units are entered into the BLOOD INVENTORY file (#65) for a specified date range.
I109	Inventory- Statistics	Capture of workload information feeds data to non-BB laboratory files which is subsequently used for a variety of local and national reports, including the CAP Laboratory Management Index Program and DSS.

Inventory Functions

C. Patient Functions

1. LAB DATA file (#63) Description of Data Elements

Field#	Field Help H	Name Prompt iption	Data Type (PM=Pattern Match)
.01	LRDFN		NUMBER
	The in Enter	nternal file number of the patient the application entry number.	(or other entity)
.02	PAREN The f Enter	T FILE ile where the name of this entry ma the appropriate parent you wish th	POINTER TO FILE (#1) ay be found. his entry associated with.
.03	NAME The i	nternal file number in the parent f	NUMBER Tile for this entry.
.04	DO NO	T TRANSFUSE	Field Not in Use
.05	ABO GI	ROUP	SET `A' FOR A; `B' FOR B; `AB' FOR AB; `O' FOR O;
	ABO b	lood group of patient	
.06	RH TY	PE	SET `POS' FOR POS; `NEG' FOR NEG
	This	is the patient's RH blood type.	
.07	RBC ANTIGENS PRESENT(other) (Subfile 63.13) POINTER Multiple RBC antigens present other than ABO & Rho(D) NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identified.		
	.01	RBC ANTIGENS PRESENT	POINTER TO FUNCTION FIELD FILE (#61.3)
		These are red blood cell antigens Rho(D). NOTE: User can only select from er file (#61.3) which have AN as the	present other than ABO and ntries in the FUNCTION FIELD identifier.
	.02	RBC ANTIGENS PRESENT COMMENT This is a comment on the red blood ANSWER MUST BE 2-80 CHARACTERS IN	FREE TEXT d cell antigen present. LENGTH

	Field Name				
	Help 1	Prompt			
Field#	ield# Description Data Type (Data Type (PM=Pattern Match)		
.075	ANTIBODIES IDENTIFIED (Subfile 63.075) POINTER Multiple				
	These are the patient's identified antibodies. Selects only antibodies.				
	NOTE: (#61.	NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.			
	.01	ANTIBODIES IDENTIFIED	POINTER TO FUNCTION FIELD FILE (#61.3)		
		This is a pointer to an antibody identified on this patient.			
		NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.			
	.02	ANTIBODIES IDENTIFIED COMMENT This is a comment on the antibodic ANSWER MUST BE 2-80 CHARACTERS IN	FREE TEXT es identified. LENGTH		
.076	BLOOD	BANK COMMENTS (Subfile 63.076)			
	.01	BLOOD BANK COMMENTS These are blood bank comments for	WORD-PROCESSING this patient.		
.08	RBC ANTIGENS ABSENT(other) (Subfile 63.016) POINTER Multiple Red blood cell antigens absent other than ABO & Rho(D). NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier.		D16) POINTER an ABO & Rho(D).		
			in the FUNCTION FIELD file		
	.01	RBC ANTIGENS ABSENT	POINTER TO FUNCTION FIELD FILE (#61.3)		
		This is a red blood cell antigen a Selects only antigens.	absent for this patient.		
		NOTE: User can only select from er file (#61.3) which have AN as the	ntries in the FUNCTION FIELD identifier		
	.02	RBC ANTIGENS ABSENT COMMENT This is the comment on the absent ANSWER MUST BE 2-80 CHARACTERS IN	FREE TEXT antigen. LENGTH		
.084	BLOOD Multi	BLOOD COMPONENT REQUEST (Subfile 63.084) POINTER Multiple			
	These are blood component requests. Selects only components that can be requested.				
	.01	BLOOD COMPONENT REQUEST	POINTER TO BLOOD PRODUCT FILE (#66)		
		This is the component requested. Selects only components that can be division.	be selected within the		
	Field Name				
--------	-------------	---	--		
	Help Prompt				
Field#	Descr	iption	Data Type (PM=Pattern Match)		
	.02	PRE-OP REQUEST	SET `1' FOR YES; `0' FOR NO;		
	.03	YES indicates this is a pre-operat REQUEST DATE/TIME	tive request. DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)		
		This is the date/time of the reque	est.		
	.04	NUMBER OF UNITS This is the number of units reques Type a Number between 1 and 50, 0	NUMBER sted. Decimal Digits.		
	.05	DATE/TIME UNITS WANTED	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)		
		THIS IS the date/time the units an	le wanted.		
	.06	PREVIOUS TRANSFUSIONS	Field Not in Use		
	.07	PREVIOUS TRANSFUSION REACTION	Field Not in Use		
	.08	ENTERING PERSON	POINTER TO NEW PERSON FILE (#200)		
		This is the person entering the re	equest.		
	.09	REQUESTING PERSON This is the person making the requ ANSWER MUST BE 2-17 CHARACTERS IN	FREE TEXT lest. LENGTH		
	1	UNITS SELECTED FOR XMATCH (Subfile Multiple These are units selected for cross SELECTS UNTS WITHOUT DISPOSITION	e 63.0841) POINTER		
		.01 UNIT SELECTED FOR XMATCH This is the unit selected for	POINTER TO BLOOD INVENTORY FILE (#65) crossmatch.		
		.02 INVERSE SPECIMEN DATE This is 9999999-collection da crossmatch. TYPE A NUMBER BETWEEN 1 AND 9	NUMBER te of the specimen for 999999.		
	2.1	COMPONENT REQUEST REASON If request does not meet acceptabl why the request should still be co ANSWER MUST BE 2-80 CHARACTERS IN	FREE TEXT le criteria enter the reason ompleted. LENGTH		
		NOTE: In addition to free text, th in the LAB DESCRIPTIONS file (#62. screen.	ne user can select from entries 5) which have BB AUDIT as the		

	Field Name		
	Help Prompt		
Field#	Descr	iption	Data Type (PM=Pattern Match)
	2.2	APPROVED BY	FREE TEXT
		This is the person approving the c ANSWER MUST BE 2-30 CHARACTERS IN	crossmatch request. LENGTH
	2.3	TREATING SPECIALITY	POINTER TO FACILITY TREATING SPECIALTY FILE (#45.7)
		This is the treating specialty of	the crossmatch request.
.085	TRANS: Multi	FUSION RECORD (Subfile 63.017)	DATE
	'l'his	is data concerning the patient's tr	cansfusion.
	.01	TRANSFUSION DATE/TIME	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer; allows dates up to the current time)
		This is a reverse chronological or transfused.	rder of blood components
	.02	COMPONENT	POINTER TO BLOOD PRODUCT FILE (#66)
		This is the component transfused. Selects only blood components that NOTE: User can only elect from ent (#66) which have BB as the identif	c can be transfused. Tries in the BLOOD PRODUCT file Fier.
	.03	COMPONENT ID This is the component identificati ANSWER MUST BE 2-12 CHARACTERS IN	FREE TEXT ion number. LENGTH
	.04	ENTERING PERSON	POINTER TO NEW PERSON FILE (#200)
		This is the person entering inform	nation on the transfusion.
	.05	ABO	SET `A' FOR A; `B' FOR B; `AB' FOR AB; `O' FOR O;
		ABO group of component	
	.06	RH	SET `POS' FOR POSITIVE; `NEG' FOR NEGATIVE;
		Rh type of component	
	.07	UNITS POOLED This is the number of units pooled TYPE A WHOLE NUMBER BETWEEN 0 AND	NUMBER 1. 99.

	Field Name			
	Help Prompt			
Field#	Descr	iption		Data Type (PM=Pattern Match)
	.08	TRANS	SFUSION REACTION	SET `1' FOR YES; `0' FOR NO;
		YES i trans	ndicates a transfusion read fusion.	ction was associated with this
	.09	DATA	ENTERED VIA OLD RECORDS	SET `1' FOR YES;
		If tr previ NOTE:	cansfusion data entered in t ous records option then a Data are not entered by th	the transfusion record via YES' will be entered here. Ne user.
	.1	VOL(m Enter Type	nl) TRANSFUSED r in milliliters the volume a Number between 1 and 1000	NUMBER of the unit transfused.), 0 Decimal Digits.
	.11	TRANS	FUSION REACTION TYPE	POINTER TO BLOOD BANK UTILITY FILE (#65.4)
		Indic	cates type of transfusion re	eaction
		NOTE: file	User can select from entra (#65.4) which have TRANSFUS	les in the BLOOD BANK UTILITY SION REACTION as the screen.
	1	TRANS Multi	FUSION COMMENT (Subfile 63 ple	186)
		.01	TRANSFUSION COMMENT These are comments on the ANSWER MUST BE 1-80 CHARAG	FREE TEXT transfusion. CTERS IN LENGTH
			NOTE: In addition to free entries in the LAB DESCRII TRANS as the screen.	text, the user can select from PTIONS file (#62.5) which have BB
	2	CROSS Multi	SMATCH COMMENT (Subfile 63.0 ple)27)
		.01 C cross ANSWE	ROSSMATCH COMMENT FREE T smatch. ER MUST BE 1-80 CHARACTERS :	EXT These are comments on the IN LENGTH
.086	TRANS Multi	FUSION	N REACTION DATE (Subfile 63	.0171) DATE
	Trans	fusion ed her	n reactions that cannot be a ce.	assigned to a specific unit are
	.01	TRANS	FUSION REACTION DATE	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
		Trans are e	fusion reactions that canno entered here.	ot be assigned to a specific unit

	Field Name			
Field#	Descri	lption	Data Type (PM=Pattern Match)	
	.02	TRANSFUSION REACTION TYPE	POINTER TO BLOOD BANK UTILITY FILE (#65.4)	
	Stores the type of transfusion re Selects only transfusion reaction NOTE: User can select from entric FILE (#65.4) which have TRANSFU		action entries in the BLOOD BANK UTILITY ON REACTION as the screen.	
	.03	PERSON ENTERING REACTION	POINTER TO NEW PERSON FILE (#200)	
		Person entering reaction informati	on	
	1	TRANSFUSION REACTION COMMENT (Subf Multiple Multiple for transfusion reaction	comment	
		.01 TRANSFUSION REACTION COMMENT F Answer must be 2-68 characters in	REE TEXT length.	
.09	HOSPI Comput	TAL ID ted field to present the hospital I	COMPUTED D from the parent file.	
.091	PAT. INFO. FREE TEXT ANSWER MUST BE 1-20 CHARACTERS IN LENGTH Patient information		FREE TEXT I	
.092	LOCAT:	ION TYPE field is used for Workload Classifi	SET 'C' FOR CLINIC; 'M' FOR MODULE; 'W' FOR WARD; 'Z' FOR OTHER LOCATION; 'N' FOR NON-CLINIC STOP; 'F' FOR FILE AREA; 'I' FOR FILE AREA; 'I' FOR IMAGING; 'OR' FOR OPERATING ROOM; cation.	
.1	REPORT ROUTING (LOCATION) FREE TEXT ANSWER MUST BE 1-19 CHARACTERS IN LENGTH The most current location where a lab procedure was requested.			
.101	REPOR	I ROUTING (PROVIDER)	POINTER TO NEW PERSON FILE (#200)	
	The mo	ost current requesting person who r	requested a lab procedure.	
.11	CUMULI Multij Currei	ATIVE REPORT PAGES (Subfile 63.03) ple nt temporary (active) page numbers	POINTER for the cumulative report.	

	Field	Name	
	Help Prompt		
Field#	Descr	iption	Data Type (PM=Pattern Match)
	.01	CUMULATIVE REPORT PAGES	POINTER TO LAB REPORTS
		First niece nace number for the cu	FILE (#64.5)
		First piece page number for the co	
	1	PAGE	NUMBER
		TYPE A WHOLE NUMBER BETWEEN 1 AND	9999
		Second piece page number for the o	cumulative report.
.2	HLA A Multi	NTIGENS PRESENT (Subfile 63.14) ple	POINTER
	These SELEC	are HLA antigens associated with t TS ONLY HLA ANTIGENS	this patient.
	NOTE: (#61.	User can only select from entries 3) which have HL as the identifier	in the FUNCTION FIELD file
	.01	HLA ANTIGEN PRESENT	POINTER TO FUNCTION FIELD
		NOTE: User can only select from er file (#61.3) which have HL as the	identifier.
	.02	HLA ANTIGEN PRESENT COMMENT ANSWER MUST BE 2-80 CHARACTERS IN	FREE TEXT LENGTH
.21	HLA A	NTIGENS ABSENT (Subfile 63.141)	POINTER
	Multi These Selec	ple are HLA antigens NOT associated w ts HLA antigens.	ith this patient.
	NOTE: (#61.	User can only select from entries 3) which have HL as the identifier	in the FUNCTION FIELD file
	.01	HLA ANTIGENS ABSENT	POINTER TO FUNCTION FIELD
		This is the HLA antigen NOT assoc	iated with this patient.
		NOTE: User can only select from er file (#61.3) which have HL as the	ntries in the FUNCTION FIELD identifier.
	.02	LA ANTIGEN ABSENT COMMENT ANSWER MUST BE 2-80 CHARACTERS IN	FREE TEXT LENGTH

	Field Help 1	Name Prompt	
Field#	Descr	iption	Data Type (PM=Pattern Match)
1	BLOOD Multi This	BANK (Subfile 63.01) ple is blood bank data on this patient.	DATE
	.01	DATE/TIME SPECIMEN TAKEN	DATE (PM=Exact date (with month and day) required, time allowed (including seconds) and echo the answer; allows dates up to the current time)
		This is the date/time the specimer ENTER PAST OR PRESENT DATE/TIME ON	was collected. NLY
	.03	DATE REPORT COMPLETED	DATE (PM=Exact date (with month and day) required, time allowed and echo the answer)
		This is the date the report was co	ompleted.
	.04	ENTERING PERSON	Field Not in Use
	.05	SPECIMEN	POINTER TO TOPOGRAPHY FIELD
		This is the specimen collected.	
	.055	COLLECTION SAMPLE	Field Not in Use
	.06	ACCESSION NUMBER This is the blood bank accession. ANSWER MUST BE 1-20 CHARACTERS IN	FREE TEXT LENGTH
	.07	PHYSICIAN	Field Not in Use
	.08	WARD	Field Not in Use
	.09	PHLEBOTOMIST	Field Not in Use
	.1	DATE/TIME RECEIVED	Field Not in Use
	.12	ACCESSION LINK	Field Not in Use
	.99	SPECIMEN COMMENT (Subfile 63.199) Multiple	
		This is a comment on the specimen. ANSWER MUST BE 2-80 CHARACTERS IN	LENGTH
		.01 SPECIMEN COMMENT Answer must be 2-68 character	FREE TEXT s in length.

	Field Name		
Field#	Descr:	prompt iption	Data Type (PM=Pattern Match)
ï	2.1	DIRECT AHG(POLYSPECIFIC) Polyspecific (broad spectrum) anti NOTE: In addition to free text, th in the AGGLUTINATION STRENGTH File	FREE TEXT iserum ne user can select from entries e (#62.55).
	2.2	DIRECT AHG(5 min incub)	Field Not in Use
	2.3	DIRECT AHG CC	Field Not in Use
	2.4	ANTI-IgG Anti-human globulin (not broad spe	FREE TEXT ectrum)
		NOTE: In addition to free text, th in the AGGLUTINATION STRENGTH file	ne user can select from entries e (#62.55).
	2.5	ANTI-IgG CC	Field Not in Use
	2.6	ANTI-COMPLEMENT Anti-human globulin (complement sp NOTE: In addition to free text, th in the AGGLUTINATION STRENGTH file	FREE TEXT pecific) ne user can select from entries e (#62.55).
	2.7	ANTI-COMPLEMENT (5 min incub)	Field Not in Use
	2.8	ANTI-COMPLEMENT CC	Field Not in Use
	2.9	DIRECT AHG INTERPRETATION	SET `P' FOR POSITIVE; `N' FOR NEGATIVE; `I' FOR INVALID, USE EDTA SPECIMEN;
Interpretation of the direct AHG			
	2.91	DIRECT AHG TEST COMMENT Any comment on the direct AHG test ANSWER MUST BE 1-80 CHARACTERS IN	FREE TEXT LENGTH
		NOTE: In addition to free text, th in the LAB DESCRIPTIONS file (#62. the screen.	ne user can select from entries .5) which have BB TESTING as
	3	ELUATE ANTIBODY (Subfile 63.012) Multiple Selects only antibodies	POINTER
		NOTE: User can only select from er file (#61.3) which have AB as the	ntries in the FUNCTION FIELD identifier.
		.01 ELUATE ANTIBODY These are eluate antibodies.	POINTER TO FUNCTION FIELD FILE (#61.3)

NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AB as the identifier.

Selects only Blood group Antibodies

Field Name Help Prompt Field# Description Data Type (PM=Pattern Match) SCREEN CELL METHOD (Subfile 63.014) Field Not in Use 4 SCREEN CELL METHOD .01 Field Not in Use .02 TECHNIQUE Field Not in Use SCREEN CELL (Subfile 63.015) Field Not in Use 1 .01 SCREEN CELL Field Not in Use .02 SOURCE Field Not in Use .03 INTERPRETATION Field Not in Use .04 IS Field Not in Use .05 37 C Field Not in Use Field Not in Use AHG .06 .07 CONTROL CELL Field Not in Use .08 ROOM TEMP Field Not in Use .09 12-18 C Field Not in Use .1 4 C Field Not in Use б ANTIBODY SCREEN INTERPRETATION SET `N' FOR NEG; `P' FOR POS; If antibodies are present in the patient's serum the antibody screen interpretation will usually be positive. 6.1 RBC ANTIGEN PRESENT (Subfile 63.011) POINTER Multiple Antigens present on RBC's of patient are entered here. Selects red blood cell antigens NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier. .01 RBC ANTIGEN PRESENT POINTER TO FUNCTION FIELD FILE (#61.3) Antigens present on RBC's of patient are entered here. NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier. COMMENT FREE TEXT .02 Answer must be 1-80 characters in length. 6.2 RBC ANTIGEN ABSENT (Subfile 63.0112) POINTER Multiple Antigens identified as absent on red blood cells are entered here. Selects red blood cell antigens NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier. RBC ANTIGEN ABSENT POINTER TO FUNCTION FIELD .01 FILE (#61.3) Antigens identified as absent on red blood cells are entered here. NOTE: User can only select from entries in the FUNCTION FIELD file (#61.3) which have AN as the identifier.

	Fiel	d Nar	ne	
	Help	Pror	npt	
Field#	Desc	ripti	ion	Data Type (PM=Pattern Match)
		.02	COMMENT	FREE TEXT
	Answer must be 1-80 characters in length.			s in length.
	6.3	HLA	ANTIGEN PRESENT (Subfile 63.013) Field Not in Use
		.01	HLA ANTIGEN PRESENT	Field Not in Use
		.02	COMMENT	Field Not in Use
	6.4	HLA	ANTIGEN ABSENT (Subfile 63.0114) Field Not in Use
		.01	HLA ANTIGEN ABSENT	Field Not in Use
		.02	COMMENT	Field Not in Use
	7	SERU	JM ANTIBODY (Subfile 63.46)	POINTER
		Mult	ciple	
		Thes	se are the serum antibodies.	
		SELE	CCTS ANTIBODIES	
		NOTE	User can only select from ent:	ries in the FUNCTION FIELD file
		(#01		
		.01	SERUM ANTIBODY	POINTER TO FUNCTION FIELD
			NOTE: User can only select from	entries in the FUNCTION FIELD
			file (#61.3) which have AB as t	he identifier.
		.02	ANTIBODY COMMENT	FREE TEXT
			ANSWER MUST BE 2-30 CHARACTERS	IN LENGTH
	8	ANTI Mult Thes	BODY SCREEN COMMENT (Subfile 63 tiple se are antibody screen comments.	.48)
		.01	ANTIBODY SCREEN COMMENT ANSWER MUST BE 2-80 CHARACTERS	FREE TEXT IN LENGTH
			NOTE: In addition to free text,	the user can select from
			TESTING as the screen.	TITE (#02.5) WHICH Have BB
	9	RBC	TYPING METHOD (Subfile 63.018)	Field Not in Use
		.01	RBC TYPING METHOD	Field Not in Use
		.02	TECHNIQUE	Field Not in Use
	1	ANTI	ISERUM (Subfile 63.019)	Field Not in Use
		.01	ANTISERUM	Field Not in Use
		.02	LOT #	Field Not in Use
		.03	INTERPRETATION	Field Not in Use
		.04	IS	Field Not in Use
		.05	37 C	Field Not in Use
		.06	AHG CONTROL CELL	Field Not in Use
		.U/ NQ	CONIKUL CELL ROOM TEMD	Field Not in Use
		.00 N9	12-18 C	Field Not in Use
		.1	4 C	Field Not in Use
			-	

Help Pr Descrip 10	rompt ption ABO INTERPRETATION	Data Type (PM=Pattern Match) SET 'A' FOR A; 'B' FOR B:
Descrip 10	ABO INTERPRETATION	Data Type (PM=Pattern Match) SET 'A' FOR A; 'B' FOR B:
10	ABO INTERPRETATION	SET `A' FOR A; `B' FOR B:
	This is the patient's ABO interp	'O' FOR O; 'AB' FOR AB; 'ND' FOR NOT DONE; retation.
10.2	ABO TYPING TECH	POINTER TO NEW PERSON
	Technologist interpretating ABO	typing results
10.3	ABO TESTING COMMENT This is a comment on the ABO tes ANSWER MUST BE 1-80 CHARACTERS	FREE TEXT ting.
11	RH INTERPRETATION	SET 'NEG' FOR NEG; 'POS' FOR POS; 'ND' FOR NOT DONE;
	This is the patient's Rh interpr	etation.
11.2	RH TYPING TECH Technologist interpretating Rh t	POINTER TO NEW PERSON FILE (#200) vping results
11.3	RH TESTING COMMENT This is a comment on the Rh test ANSWER MUST BE 1-80 CHARACTERS	FREE TEXT ing.
121 122 123 124 125 126 127 128 129 129.1 129.11 129.12 131 132 133 134	PT CELLS+ANTI D (sal) PT CELLS+RH CTRL (sal) PT CELLS(sal)+ANTI D(hp IS) PT CELLS(ser)+ANTI D(hp IS) PT CELLS+ANTI D (hp 37) PT CELLS+ANTI D (hp AHG) PT CELLS+ANTI D SLIDE (hp) PT CELLS(sal)+RH CTRL (hp IS) PT CELLS(ser)+RH CTRL (hp IS) PT CELLS+RH CTRL (hp 37) PT CELLS+RH CTRL (hp AHG) PT CELLS+RH CTRL SLIDE (hp) INTERPRETATION OF RH TESTING RH TEST COMMENT PT Cells(sal)+Anti D(mod) IS PT Cells(ser)+Anti D(mod) IS PT Cells(ser)+Anti D(mod) IS	Field Not in Use Field Not in Use
	10.2 10.3 11 11.2 11.3 121 122 123 124 125 126 127 128 129 129.1 129.11 129.12 131 132 133 134 135	<pre>10.2 ABO TYPING TECH Technologist interpretating ABO 10.3 ABO TESTING COMMENT This is a comment on the ABO tes ANSWER MUST BE 1-80 CHARACTERS 11 RH INTERPRETATION This is the patient's Rh interpr 11.2 RH TYPING TECH Technologist interpretating Rh t 11.3 RH TESTING COMMENT This is a comment on the Rh test ANSWER MUST BE 1-80 CHARACTERS 121 PT CELLS+ANTI D (sal) 122 PT CELLS+RH CTRL (sal) 123 PT CELLS(sal)+ANTI D(hp IS) 124 PT CELLS(sal)+ANTI D(hp IS) 125 PT CELLS+ANTI D (hp 37) 126 PT CELLS+ANTI D (hp 37) 126 PT CELLS(sal)+RH CTRL (hp IS) 127 PT CELLS(sal)+RH CTRL (hp IS) 128 PT CELLS(sal)+RH CTRL (hp IS) 129 PT CELLS(sal)+RH CTRL (hp AHG) 129.11 PT CELLS+RH CTRL (hp AHG) 129.12 PT CELLS+RH CTRL (hp AHG) 129.12 PT CELLS+RH CTRL (hp AHG) 129.12 PT CELLS+RH CTRL (hp AHG) 129.13 INTERPRETATION OF RH TESTING 132 RH TEST COMMENT 133 PT Cells(sal)+Anti D(mod) IS 134 PT Cells(sal)+Anti D(mod) IS 135 PT Cells+Anti D(mod) 37</pre>

	Field N Help Pr	ame ompt	
Field#	Descrip	tion	Data Type (PM=Pattern Match)
	136	PT Cells+Anti D(mod) AHG	Field Not in Use
	138	PT Cells(sal)+RH Ctrl(sal) IS	Field Not in Use
	139 F	T Cells(ser)+RH Ctrl(sal) IS	Field Not in Use
	139.1	PT Cells+RH Ctrl(sal) 37	Field Not in Use
	139.11	PT Cells+RH Ctrl(sal) AHG	Field Not in Use
	141	PT CELLS(ser)+ANTI A IS	Field Not in Use
	142	PT CELLS(sal)+ANTI A IS	Field Not in Use
	143	PT CELLS+ANTI A SLIDE	Field Not in Use
	144	PT CELLS(ser)+ANTI B IS	Field Not in Use
	145	PT CELLS(sal)+ANTI B IS	Field Not in Use
	146	PT CELLS+ANTI B SLIDE	Field Not in Use
	147	PT CELLS(ser)+ANTI A,B IS	Field Not in Use
	148	PT CELLS(ser)+ANTI A,B (RT)	Field Not in Use
	149	PT CELLS(sal)+ANTI A,B (IS)	Field Not in Use
	149.1	PT CELLS(sal)+ANTI A,B (RT)	Field Not in Use
	149.11	PT CELLS+ANTI A,B SLIDE	Field Not in Use
	149.12	PT SERUM+A1 CELLS	Field Not in Use
	149.13	PT SERUM+B CELLS	Field Not in Use
	151	INTERPRETATION OF ABO TESTING	Field Not in Use
	152	ABO TESTING COMMENT	Field Not in Use
	153	INTERPRETATION ABO GROUP(cell)	Field Not in Use
	154	INTERPRETATION ABO GROUP(ser)	Field Not in Use

File continues with other laboratory data for anatomic and clinical pathology.

Software Limitations

Functionality	Description of Software Limitations
Patient- Specimen Receipt & Order Entry	Manual system for patient/recipient armband identification. Manual system for recording and tracking the identification of the phlebotomist. Partial system for entry of blood component requests/orders (chart and SF518). No provision for a cumulative system of records for blood components requests within the Blood Bank software, (i.e., data is editable and represents only current information).
Patient - Test Result Entry (other than crossmatching)	No provision for test result interpretation based on actual testing results, (e.g. evaluation of reactions of antisera). Manual entry of test result interpretations of all required testing.
Patient - Unit Selection & Pretransfusion Testing	No provision for test result interpretation based on actual testing results, (e.g. evaluation of reactions of antisera). Manual entry of test result interpretations of all required testing. Manual documentation of previous history checks. No automatic updating and evaluation of donor recruitment/recall information based on actual donation data. Partial system for evaluating units selected versus blood component requests. No provision for evaluation of requirements for irradiation of directed donor units, i.e., unit from a donor who is a blood relative. No provision for evaluation of requirements for hemoglobin testing on units used for massive or exchange transfusions. No automatic provision for evaluation of specific component requirements, e.g., CMV negative units. No provision for performance of electronic crossmatch.
Patient- Transfusion Data Entry	No provision for electronic primary documentation of blood administration data. No provision for electronic documentation of autologous blood collected/transfused as part of preoperative salvage procedures.

Functionality	Description of Software Limitations
Patient - Investigation of Adverse Effects	No provision for test result interpretation based on
_	actual testing results, e.g. evaluation of reactions of
	antisera.
	Manual entry of results of testing associated with
	transfusion reaction investigations.
	No provision for reporting pathologist's
	evaluation/summary of transfusion reaction
	investigations.
Patient - Records	Manual record-keeping system prior to the
	computerization with site determination regarding
	entry of "old" data.
	Manual record-keeping system for actual test results.
	Partial system for recording blood administration data,
	i.e., date/time of transfusion and whether patient had a
	reaction.
	Manual system of records for blood components
	requests, i.e., data within the Blood Bank software is
	editable and represents only current request
	information.
	No provision of record-keeping system for "look back"
	notifications.

Intended Uses

IU#	Functionality	Description of Intended Use
P1	Patient - General	Ability to set up a site parameter to indicate whether the fields for direct antiglobulin testing should be included in the edit template for entering ABO/Rh and antibody screening results.
P2	Patient - General	Ability for the site to define standardized canned comments that are accessible during data entry based on the entry in the Screen field (#5).
P3	Patient - General	Ability for the site to define consultation reports for both serum antibodies and positive direct antiglobulin tests.
P4	Patient - General	Ability for the site to define which antibodies are clinically significant and to designate what corresponding antigen should be lacking in units of red blood cells selected for a patient possessing that antibody.
P5	Patient - General	Ability for the site to define which test results should be displayed when accessioning blood bank specimens/entering blood component requests.
P6	Patient - General	Ability for the site to define types of transfusion reactions for selection in data entry.
P7	Patient - General	Provision of a unique cumulative record for each individual patient based on the data elements detailed above for the blood bank portion of the LAB DATA file (#63).
P8	Patient - General	Maintenance of patient record confidentiality for test results/transfusion histories by providing different levels of security access such that the type of data access can be defined by individual user.
P9	Patient - General	Site specific control to set up the entries in the BLOOD PRODUCT file (#66) for component specific requirements and algorithms to reflect facility operating procedures. See Section IX for a listing of the data elements and the description of their use.
P10	Patient - General	Limited simultaneous access by multiple terminals/ users to the same patient record for purposes of data entry for specified options.
P11	Patient - General	Cumulative patient data/transfusion record, including data on clinically significant antibodies, transfusion reactions and units transfused, updates immediately upon data entry.
P12	Patient - General	Displays patient transfusion record in reverse chronological order for a specified date range (in either detailed or summary format), including any history of previous transfusion reactions and entries in the ANTIBODIES IDENTIFIED field (#.075) or BLOOD BANK COMMENTS field (#.01) of the LAB DATA file (#63). User can also specify the component if so desired.
P13	Patient - General	Limited access to those units currently assigned to the same division as the user.
P14	Patient - General	Accommodation of the use of a bar code reader for entry of the unit ID
P15	Patient - General	Tracking of changes in verified data for specific data elements defined for the LAB DATA file (#63).
P16	Patient - General	Tracing of verified data entered for critical data elements as detailed for the LAB DATA file (#63) when entered via the supervisory edit options requiring a higher level of security
P17	Patient - General	Tracking of the person entering the data into the computer

IU#	Functionality	Description of Intended Use
P18	Patient - General	Elimination of the need for duplicate data entry by also updating the unit record immediately upon data entry.
P19	Patient - General	Display of patient demographics, including first and last names, social security number, date of birth, ABO/Rh of record (if one exists), and admitting diagnosis.
P20	Patient - General	Display of an alert message for any patients with a previous antibody history, regardless of division, based on entries in the Antibodies Identified field (#.075).
P21	Patient - General	Display of previous transfusion reactions, regardless of division, for both unit specific and non-unit specific reactions.
P22	Patient - General	Display of an alert message for any patients who have autologous and/or directed units in inventory, regardless of the division, based on a match in the Restricted For field (#8) of the unit.
P23	Patient - General	Limited component selection to those components for which the Can Be Requested field (#.15) in the BLOOD PRODUCT file (#66) =YES and which are assigned to the appropriate division.
P24	Patient - General	Provision of a variety of reports that can be used for supervisory review. Including one which details the patient's ABO/Rh, AB Screen results, DAT results and serum/eluate antibodies, for the current specimen and a specified number of previous specimens, as well as entries in the Antibodies Identified field (#.075) and the Blood Bank Comments field (#.01).
P25	Patient - General	Entry of special instructions in the Blood Bank Comments field (#.01) regarding specific component requirements.
P26	Patient - Old Records	Entry of previous transfusion history, ABO/Rh, clinically significant antibodies, red cell phenotyping and transfusion reactions.
P27	Patient - Old Records	Provision of access to fields for entry of comments/special instructions, which might be relevant for future reference.
P28	Patient - Old Records	No entry of historical unit information, if unit is in the current BLOOD INVENTORY file #65.
P29	Patient - Old Records	Ability to edit information entered from old records prior to computerization, (i.e., cannot access units in the BLOOD INVENTORY file (#65)). (Requires a higher level of security access).
P30	Patient - Specimen Receipt & Order Entry	Ability for the site to define Blood Bank tests in the LABORATORY TEST file (#60) which can be ordered by both Blood Bank personnel and other hospital personnel, e.g., transfusion request, type and screen, etc.
P31	Patient - Specimen Receipt & Order Entry [LREV]	Display of test description information based on entries for the specific test in the LABORATORY TEST file (#60).
P32	Patient - Specimen Receipt & Order Entry [LREV]	Ability to accept orders for Blood Bank tests which are entered through other software packages and to update the status of the order as appropriate.
P33	Patient - Specimen Receipt & Order Entry	Displays a listing of accessions for the patient for a specified accession area, including previous transfusion reaction information and data from the Antibodies Identified field (#.075) and the Blood Bank Comments field (#.01) if data exists.
P34	Patient - Specimen Receipt & Order Entry	Ability for the Blood Bank personnel to enter component requests, for those which can be requested, for a specific patient.

IU#	Functionality	Description of Intended Use
P35	Patient - Specimen Receipt & Order Entry	Check to determine whether a previous specimen has been accessioned which was collected within the last 72 hours, regardless of division.
P36	Patient - Specimen Receipt & Order Entry	Evaluation of the age of patient specimens available for the specific accession area and appropriate division to determine whether any meet the requirements based on the entry in the Maximum Specimen Age field (#16) of the BLOOD PRODUCT file (#66) for the specific component.
P37	Patient - Specimen Receipt & Order Entry	Display of the most recent lab values for specified tests to allow auditing of the request based on locally defined parameters.
P38	Patient - Specimen Receipt & Order Entry	Ability for the site to define, by specific surgical procedure in the OPERATIONS (MSBOS) file (#66.5), by specific blood component, the maximum number of units which may be requested without additional justification.
P39	Patient - Specimen Receipt & Order Entry	Evaluation of pre-operative component requests against audit criteria as defined by the facility.
P40	Patient - Specimen Receipt & Order Entry	Ability for the site to define specific audit criteria for pre-op and non pre-op requests, by blood component.
P41	Patient - Specimen Receipt & Order Entry	Evaluation of requests against facility defined audit criteria for the specific component and current lab results, flagging requests which may be potentially inappropriate and allowing for input of additional justification for those requests.
P42	Patient - Specimen Receipt and Order Entry	Capture of appropriate data for evaluation of ordering practices by treating specialty through a variety of different reports.
P43	Patient - Specimen Receipt and Order Entry	No deletion of accession if there is verified data entered for that accession.
P44	Patient - Test Result Entry (other than crossmatching)	Creation of the patient's historical ABO/Rh record based on the first entry of ABO/Rh results for the patient.
P45	Patient - Test Result Entry (other than crossmatching)	Requirement for the use of a separate option to edit the patient's historical ABO/Rh record. (Requires a higher level of security access).

IU#	Functionality	Description of Intended Use
P46	Patient - Test Result Entry (other than crossmatching)	Comparison of current ABO/Rh interpretations to patient history and display of a warning message if a discrepancy exists.
P47	Patient - Test Result Entry (other than crossmatching)	Display of a warning message on those patients who have no previous history to be used for comparison with current results.
P48	Patient - Test Result Entry (other than crossmatching)	Automatic display of patient medications (both inpatient and outpatient, oral and IV) for patients upon entry of a positive direct antiglobulin test.
P49	Patient - Test Result Entry (other than crossmatching)	Ability to view patient's medications, i.e. both inpatient and outpatient oral and IV.
P50	Patient - Test Result Entry (other than crossmatching)	Tracking of data entry errors for ABO/Rh when comparisons with previous history fail to match even if data is corrected since such errors might adversely affect the patient if not caught.
P51	Patient - Test Result Entry (other than crossmatching)	If changes are made in verified data for ABO/Rh testing, antibody screening or direct antiglobulin testing, automatic generation of a comment "reported incorrectly as" to indicate the original data. This comment is then included on the Blood Bank Test Report.
P52	Patient - Test Result Entry (other than crossmatching)	Ability to generate a cumulative Blood Bank Test Report which includes the patient demographics (name, SSN, DOB and historical ABO/Rh), antibodies identified, the test results of individual specimens (ABO, Rh, Direct AHG, Antibody Screen, Serum Antibody and Eluate Antibody), and if requested, the current component requests.
P53	Patient - Test Result Entry (other than crossmatching)	Creation of a print queue upon entry of test results and provides the ability to either print the Blood Bank Test Report in batches for all patients in the queue or to delete the queue.
P54	Patient - Test Result Entry (other than crossmatching)	Custom consultation reports for patients with irregular antibodies and/or positive direct antiglobulin tests based on data entered for specific specimen and site specific file set-ups.
P55	Patient- Unit Selection & Pretransfusion Testing	No selection of units which are expired through the usual option, requiring a different option and a level of security access to enter compatibility information and assign an expired unit to a patient.
P56	Patient- Unit Selection & Pretransfusion Testing	Ability to assign units or enter crossmatch results if the age of the specimen exceeds the maximum requirements for the specific component requires a higher level of security access and a different option than that used routinely.
P57	Patient- Unit Selection & Pretransfusion Testing	Predefined algorithm and parameters defined for the specific component, to prevent selection of units that are not ABO/Rh compatible.
P58	Patient- Unit Selection & Pretransfusion Testing	Ability to assign a unit which is not ABO/Rh compatible according to the component specific parameters, requiring a higher level of security access and a different option than that used routinely.

IU#	Functionality	Description of Intended Use
P59	Patient- Unit Selection & Pretransfusion Testing	User controlled choice as to whether selection of units should be limited to those not currently assigned to another patient.
P60	Patient- Unit Selection & Pretransfusion Testing	Display of any entries in the LAB DATA file (#63), Blood Bank Comments field (#.01) including those which might detail specific component needs.
P61	Patient- Unit Selection & Pretransfusion Testing	Display of a warning message if the current volume is less than the average volume for the component if it is a pediatric component.
P62	Patient- Unit Selection & Pretransfusion Testing	Display of a message indicating the number of days left before expiration of unit.
P63	Patient- Unit Selection & Pretransfusion Testing	Prevents access to units which have not been appropriately 'selected' unless data is entered via a different option with a higher level of security and an automatic audit trail.
P64	Patient- Unit Selection & Pretransfusion Testing	Algorithm to evaluate confirmatory testing and display of a warning message if required testing has not been completed.
P65	Patient- Unit Selection & Pretransfusion Testing	No change in the unit status to make the unit available for subsequent issue if the unit recheck results do not match the unit log- in information.
P66	Patient- Unit Selection & Pretransfusion Testing	No ability to delete the patient's historical record of ABO/Rh.
P67	Patient- Unit Selection & Pretransfusion Testing	Comparison of the unit ABO/Rh to the patient history and prevents unit selection if there is no patient ABO/Rh on record.
P68	Patient- Unit Selection & Pretransfusion Testing	Entry of crossmatch interpretation prevented if no ABO/Rh results have been entered on the current specimen.

IU#	Functionality	Description of Intended Use
P69	Patient- Unit	Display of a warning message if no results are entered for the
	Selection &	antibody screening on the current specimen.
	Pretransfusion	
	Testing	
P70	Patient Unit	Generation of a label containing patient identification and unit
	Selection &	information to be attached to the tie tag for the unit in order to
	Pretransfusion	minimize opportunities for transcription errors.
	Testing	
P71	Patient- Unit	Algorithm to evaluate unit phenotyping of allogeneic (homologous and
	Selection &	directed) units, against clinically significant patient antibody in order
	Pretransfusion	to prevent selection of the unit for the patient if the corresponding
	Testing	antigen is present in the unit.
P72	Patient- Unit	Evaluation of unit phenotyping of allogeneic (homologous) units
	Selection &	against clinically significant patient antibody and display of a
	Pretransfusion	warning message if the corresponding Ag is not entered in the RBC
	Testing	Antigen Absent field (#.05).
P73	Patient- Unit	Determination as to whether crossmatch result is required for the
	Selection &	specific component.
	Pretransfusion	
	Testing	
P74	Patient- Unit	Status change to 'assigned' for subsequent issue is prevented if the
	Selection &	crossmatch result is anything other than' C' or 'IG'.
	Pretransfusion	
	Testing	
P75	Patient- Unit	Status change to allow issue of the unit is prevented unless the
	Selection &	initials entered match those of the user <u>and</u> the user also holds the
	Pretransfusion	appropriate security key.
	Testing	
P76	Patient- Unit	Release of units back to available inventory if the result entered for
	Selection &	the crossmatch is not 'C' or 'IG'
	Pretransfusion	
	Testing	
P77	Patient- Unit	No ability to select units not associated with the appropriate division
	Selection &	(even autologous)
	Pretransfusion	
	Testing	
P78	Patient- Unit	Selection of autologous unit for a different patient than the patient
	Selection &	designated is prevented.
	Pretransfusion	
	Testing	
P79	Patient- Unit	Automatic display of the current information on component requests
	Selection &	and units assigned/available for issue.
	Pretransfusion	
	Testing	
	[LRBLQPR]	
P80	Patient - Transfusion	Calculation of the number of units in a pool and entry of the data in
	Data Entry	the Pooled/Divided Units field for the pooled product which was
		created if a pooled product is transfused.

IU#	Functionality	Description of Intended Use
P81	Patient - Transfusion	Entry of unit specific transfusion reaction data, (i.e., type of reaction
	Data Entry	and appropriate comments).
P82	Patient - Transfusion	Entry of future transfusion dates prohibited.
	Data Entry	
P83	Patient - Transfusion	Capture of appropriate data for evaluation of transfusion practices by
D0.4	Data Entry	treating specialty through a variety of different reports.
P84	Patient -	Entry of transfusion reaction data which is unrelated to a specific
	Adverse Effects	unt.
P85	Patient -	Report of transfusion data, sorted by natient, including both reactions
100	Investigation of	associated with a specific unit and those not associated with specific
	Adverse Effects	units.
P86	Patient -	Report for use in identifying potential cases of transfusion
	Investigation of	transmitted disease, based on search of those patients transfused
	Adverse Effects	within the previous six month period for specific patient test results
		using facility specified tests and facility defined values.
P87	Patient -	Report of crossmatch transfusion ratios, sorted by treating specialty,
	Management/	in either summary or detailed format to allow a review of ordering
	Quality	patterns.
Dee	Detiont	Papart of patient's grossmatched for a specified data range, sorted by
F 00	Management/	date/time crossmatched to allow a review of ordering patterns
	Quality	Report includes specimen info unit ID_XM result outcome of XM
	Improvement	(released or transfused) and statistics on the # of patients
	1	crossmatched, # of specimens crossmatched, # of units transfused, the
		C:T ratio and the # of crossmatches for each result (C, IG, etc.).
P89	Patient -	Report of autologous unit dispositions, sorted by whether the unit was
	Management/	transfused or not, including the patient information, treating
	Quality	specialty if unit was transfused, component, unit ID and the number
Dee	Improvement	of days in inventory, to allow evaluation of utilization patterns.
P90	Patient -	Mechanism to identify units with a prolonged infusion time, based on
	Management/	component specific local parameters for maximum infusion time.
	Quality Improvement	
P91	Patient -	Administrative data report which detail data requested
101	Management/	on the annual AABB questionnaire, sorted into inventory and donor
	Quality	groupings.
	Improvement	
P92	Patient -	Report of potentially inappropriate transfusions based on the auditing
	Management/	done during specimen log-in /order entry, sorted by location to which
	Quality	the unit was issued for transfusion.
Dac	Improvement	
P93	Patient -	Patient report for use in outcome assessments, integrating
	wanagement/	transitision episodes and clinical lab results for site selected tests.
	Improvement	User can request the report for specific patients and date ranges or specify that reports should be printed for all patients transfused
	mprovement	within a specified date range.

IU#	Functionality	Description of Intended Use
P94	Patient - Management/Quality Improvement	Hard copy listing of patients who have been transfused for a specified treating specialty, for a specified date range.
P95	Patient - Management/Quality Improvement	Report of all units transfused within a specified date range, sorted in alphabetical order by patient, and in chronological order for the specified disposition dates. Report includes patient name and SSN, unit ID, component, # in pool if appropriate, volume, inspection information, issue location, transfusion date/time and transfusion reaction information.
P96	Patient - Management/Quality Improvement	Report of all units transfused within a specified treating specialty, a specified component and a specified date range, sorted by treating specialty, then by component, then alphabetically by patient. Report includes patient transfused, transfusion date/time, primary care physician, cost, unit ID and statistics for each treating specialty on # patients given RBC components, # patients given non-RBC components and cost.
P97	Patient - Records	Permanent on-line storage of Blood Bank data, i.e. data is not included in algorithm used for archiving patient test results.
P98	Patient - Records	Hard copy listing of patients who have clinically significant antibodies.
P99	Patient - Records	Hard copy listing of patients who have Blood Bank data for reference during computer downtimes. Report includes the patients historical ABO/Rh, any clinically significant antibodies or special instructions, and if requested, results of the most recent ABO/Rh and Antibody Screen. User can specify the range of patients and whether all patients with BB data should be included or if listing should be limited to those with antibodies or comments.
P100	Patient - Statistics	Capture of workload information and feeds data to non-BB laboratory files which is subsequently used for a variety of local and national reports, including the CAP Laboratory Management Index Program and DSS.