

## ISBT128 Implementation Plan

### 1. Determine Whether ICCBBA Registration is Required

- a. Criteria for Registration:
  - i. All blood collection centers, whether free standing or within a hospital, must register because their identification number will become an integral part of the unit identification on the label.
  - ii. For Transfusion Services (facilities that do not collect but only transfuse blood products), registration and licensing with ICCBBA is required if they apply ISBT128 labels. This encompasses facilities that pool, aliquot or modify products and label them with ISBT128 bar codes.
- b. ICCBBA registration required.
- c. Facility Identification Number:
- d. This registration must be renewed yearly.
  - i. Renewal completed by: \_\_\_\_\_
  - ii. Registration information on file in:
- e. **Status:**
  - i. Registration: Done
  - ii. Annual renewal:  
**Completed by** \_\_\_\_\_ **/ Date** \_\_\_\_\_

### 2. Discuss Relevant Issues with Medical Director

- a. Issues discussed with Medical Director
  - i. AABB ISBT128 documents
  - ii. Timeline
  - iii. Email information when available
- b. **Status:**  
**Completed by by** \_\_\_\_\_ **/ Date** \_\_\_\_\_

### 3. Notify Other Laboratory Supervisors

- a. LIS director notified
  - i. AABB ISBT128 documents
  - ii. Timeline
  - iii. included on all emails
- b. Hematology supervisor: QC of products
- c. Microbiology supervisor: bacterial contamination of components involved in transfusion reactions.
- d. Blood Bank supervisors notified:
  - i. (day shift)
  - ii. (evening shift)
  - iii. (midnight shift)
- e. Other areas of the laboratory will be affected at this time.

- f. **Status:**  
**Completed by** \_\_\_\_\_ / **Date** \_\_\_\_\_

**4. Get Approval from Laboratory Administration**

- a. Discuss system changes and/or allocation for additional resources
- b. Budget for costs including system upgrades
- c. Help in assessing computer system to determine capabilities to read ISBT128 bar code symbology
- d. Help in assessing interfaces to ensure information can be transferred accurately
- e. **Status:**  
**Completed by** \_\_\_\_\_ / **Date** \_\_\_\_\_

**5. Notify Anesthesiology, Nursing and Other Ancillary Services**

- a. Evaluate nursing forms (flowsheets, operative notes, etc.) for accommodation of longer unit numbers
- b. Schedule training to coincide with nursing training rotation
- c. Consider having “boxes” or other tools on forms to assist in documenting every digit in the unit identification number (include individuals involved in the documentation of blood administration)
- d. **Status:**  
**Completed by** \_\_\_\_\_ / **Date** \_\_\_\_\_

**6. Evaluate Supply and ordering Issues**

- a. Order blood product face labels
- b. Determine current inventory of unit tags – adjust re-orders as needed prior to revisions
- c. Review unit tag forms and check for revisions needed by the new donor unit number.
- d. All labels that are used for blood products must be changed to ISBT128 bar codes:
  - i. Print our own labels
    - 1. Stock supply of self printed labels
    - 2. on-demand as component changes
- e. Bbar code scanners
  - i. Scanners:)
  - ii. Able to read ISBT128
  - iii. Have ICCBBA access to “error” bar codes for validation
- f. Bar code printers
  - i. The ISBT128 donor numbers will be 19 characters, codabar is 10 to 12 characters
  - ii. Printer is able to print ISBT128 bar codes
  - iii. Need different label stock to print larger bar codes??
    - 1. contact Intermec customer service

- g. **Status:**  
**Completed by** \_\_\_\_\_ / **Date** \_\_\_\_\_

**7. Validate Computer Changes transition to ISBT128**

- a. The new label:
- i. The unit number is now a 13-digit number, which may necessitate lengthening the space or the number of characters allowed by the computer system
  - ii. The component code has increased in length, and is now an 8-digit code
  - iii. The “field” for the expiration date now includes the time of expiration
- b. Additional:
- i. Verify transfer of information to computer reports (operational, statistical, workload, billing, etc.)
  - ii. Validate data from donor system to blood bank system
  - iii. Verify that components (including aliquots, splits, pools and those that are irradiated or leukoreduced, etc.) are billed appropriately
- c. **Status:**  
**Completed by** \_\_\_\_\_ / **Date** \_\_\_\_\_

**8. Validate Equipment**

- a. Follow protocols for implementation and validation of equipment – such as bar code readers – related to the use of ISBT128 bar code symbology
- b. Bar code scanners and printers should be validated prior to ensure they can be used with the new bar codes or they must be replaced with a different product
- c. **Status:**  
**Completed by** \_\_\_\_\_ / **Date** \_\_\_\_\_

**9. Validate Processes (July to September 2007)**

- a. Verify that applicable processes have been considered:
- i. Collection
  - ii. Aliquoting
  - iii. Pooling
  - iv. Unit labeling
  - v. Preparing a new component by washing, irradiation, leukoreduction, etc.
  - vi. Label ordering:
    - 1. Since the year is now included as an integral part of the unit number, the “schedule” for ordering labels must be able to accommodate the collection of units labeled W XXXX 06 XXXXXX in the year 2006

2. A grace period of one month has been established to reduce wastage of labels. The unit identification labels that include "07" may be used between December 1, 2006 and January 31, 2008
3. Evaluate how many unit numbers are used within a defined period (allow for an unexpected mass influx of donors)
4. Review SOPs – may include examples of labels and forms used in any process.

b. **Status:**  
**Completed by** \_\_\_\_\_ **/ Date** \_\_\_\_\_

**10. Modify Forms in the Transfusion Service**

- a. Determine where the blood unit identification number is recorded:
  - i. BDR
  - ii. Transfusion Reaction Reports
  - iii. Downtime forms
  - iv. Disease marker sample shipping forms
  - v. Washing / deglycerolizing logs
  - vi. Supplier return forms
  - vii. Emergency Release forms
  - viii. Outside refrigerator Emergency RBC forms
  - ix. Lookback forms
  - x. Etc.

b. **Status:**  
**Completed by** \_\_\_\_\_ **/ Date** \_\_\_\_\_

**11. Staff Training**

a. **Status:**  
**Completed by** \_\_\_\_\_ **/ Date** \_\_\_\_\_

**12. Determine what inventory issues may arise during the transition process**

- a. Every facility will need to be able to "read" both Codabar and ISBT128 bar code symbology for an extended period of time
  - i. FFP
  - ii. Frozen RBCs
  - iii. Rare units - frozen

b. **Status:** to be done  
**Completed by** \_\_\_\_\_ **/ Date** \_\_\_\_\_

**13. Implementation**

a. **Status:**  
**Completed by** \_\_\_\_\_ **/ Date** \_\_\_\_\_

**14. Follow-up**

- a. Blood product products: RBC inventory
  - i. Verify all non-frozen products are in ISBT128
  - ii. If not – notify supplier