

# Department of Veterans Affairs

# Memorandum

Date: October 2, 2003

From: National Director, Pathology and Laboratory Medicine(115)

Subj: Workaround for NOIS IND-1003-40020

To: Blood Bank Supervisors (113)

Laboratory patch LR\*5.2\*301 was released September 15, 2003 in support of the VBECS (Vista Blood Establishment Computer Software) Blood Bank Modernization Project. This patch was intended to be part of the transition to decouple the Blood Bank and Laboratory applications in preparation for a future stand-alone Blood Bank system. However, this Laboratory patch is having an unexpected effect on the Vista Blood Bank software. The Laboratory Clinical Support Team is preparing a patch (LR\*5.2\*310) which will be installed with a high priority to return the Blood Bank software to its pre-patch (LR\*5.2\*301) state.

## Problem:

This is not an antibody specific problem. After installation of LR\*5.2\*301 into a site's production account, any crossmatch compatible, antigen positive unit may be selected and released for patient transfusion without the software detecting and preventing the error, as the software was originally designed.

A patient with an antibody identified and entered into the "Select ANTIBODIES IDENTIFIED" and a requirement for antigen negative red blood cell components was able to have an antigen positive unit selected and crossmatched in "P-RS-US" and "P-RS-XM". There was no notice to the technologist that this unit was antigen positive with a prohibition to continue processing. In addition, if crossmatch compatible, this antigen positive unit was allowed to be released inappropriately through "I-DR", without any warning message.

## Workaround:

1. Determine if LR\*5.2\*301 was installed in your site's production account. If so, proceed with the next steps.
2. Ensure that all staff performing testing are aware of this problem so they will not depend on the Vista software to prevent patients with antibodies from receiving antigen positive units. A patient's antibody will still display in "Antibody present". Internal laboratory policies must be followed to ensure that antigen negative blood components are provided when required.
3. Review all patient records since installation of LR\*5.2\*301 for any evidence of inappropriate release of antigen positive units to patients with the antibody. Any instances where antigen positive red blood cells were released from the Blood Bank to a patient with that antibody (even if the blood

was not transfused), must be reported to the National Help Desk as a NOIS report. Contact your IRM department for assistance.

4. Immediately install LR\*5.2\*310 when available. Installation of LR\*5.2\*310 is intended to restore VistA Blood Bank software pre-installation safety features to prevent the release of antigen positive units to patients with clinically significant antibodies. After installation of LR\*5.2\*310, each blood bank must validate that previously existing checks to prevent crossmatch and issue of antigen positive units to patients with the antibody are working as intended.

A handwritten signature in black ink, appearing to read "Fred Rodriguez". The signature is fluid and cursive, with a large, stylized initial "F" and "R".

Fred Rodriguez, M.D.

National Director, Pathology and Laboratory Medicine(115)