

Twenty-third Ask OBI Anything (AOA)

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Objectives

- Welcome
- Transfusion Section Website
- Response to Questions – What do I do if I cannot access BloodHub?
- Education – ABO Testing
- Blood Drives/System Inventory Status

Website

- <https://ourbloodinstitute.org/hospital/>

Ask OBI Anything – Response to Questions


What do I do if I cannot access BloodHub?

- Call your OBI Reference Lab
 - They will verbally take your order and put it into BloodHub for you
- Fill out a transfusion service request form
 - This is your official record for your order
- Reach out to your facility's BloodHub Admin
 - They can create an account for you or reset your password
 - If you do not know who your admin is, contact Emily Flippo


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TRANSFUSION SERVICES REQUEST FORM


This form is ordered from supply #510250




Arkansas Blood Institute
101 S. Shackelford Rd. #2
Little Rock, AR 72221
(501) 904-4899



Sylvan N Goldman Center
Oklahoma Blood Institute
1001 N Lincoln Blvd.
Oklahoma City, OK 73104
(405) 297-5654



Oklahoma Blood Institute
4601 East 81st St.
Tulsa, OK 74137
(918) 703-4833



Coffee Memorial Blood Center
7500 Wallace Blvd.
Amarillo, TX 79124
(806) 358-3071

TRANSFUSION SERVICES REQUEST FORM

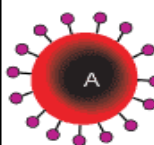
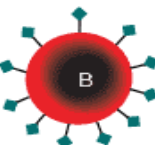
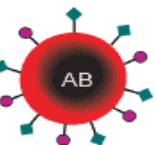
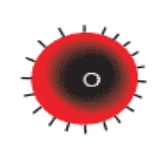
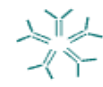

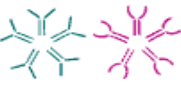



First Name	Last Name	TYPENEX LABEL	Facility Name	
MRN	SSN		Draw Date & Time	Phlebotomist ID
DOB	<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE Gender	<input type="checkbox"/> Surgery	Pregnancy or Transfusions the Past 3 Months? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Physician		<input type="checkbox"/> To Give	Patient Consent for Transfusion Form Signed? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Diagnosis		<input type="checkbox"/> To Hold	Priority: <input type="checkbox"/> STAT <input type="checkbox"/> ASAP <input type="checkbox"/> Routine	
Patient Pre-Transfusion Lab Values			Date & Time Needed	
Hgb/Hct (RBC's)		<input type="checkbox"/> Type & Screen	<input type="checkbox"/> Red Blood Cells # _____	<input type="checkbox"/> Irradiated
Platelet Count (PLT's)		<input type="checkbox"/> Type & Crossmatch	<input type="checkbox"/> Apheresis Platelets # _____	<input type="checkbox"/> Hgb S Negative
PT/PTT (FFP)		<input type="checkbox"/> ABO / Rh	<input type="checkbox"/> FFP 250mls # _____	<input type="checkbox"/> CMV Negative
Fibrinogen (CRYO)		<input type="checkbox"/> Clot to Hold	<input type="checkbox"/> CRYO # _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> No current lab values available.			<input type="checkbox"/> Autologous:	
			<input type="checkbox"/> RBC's <input type="checkbox"/> Plasma	
			<input type="checkbox"/> Directed Donor	

Facility Name: Sylvan N. Goldman 1001 N. Lincoln, Oklahoma City, Oklahoma 73104. The official copy of blood bank documentation is the electronic copy on file with the local area network. The official copy of records created from forms is paper unless designated otherwise.

Print Date: Apply Location sticker here
OR
Insert Location code _____

Education- ABO Testing

- 2-step process to ensure correct type is assigned to the patient
 - ABO-incompatible transfusions can lead to acute hemolytic transfusion reactions
- Forward Type: mix patient RBCs with reagent antisera to detect A and B antigens in the patient
- Reverse Type: mix patient plasma with test A1 and B RBCs to detect anti-A and anti-B antibodies in the patient
- Serologic testing is positive if agglutination occurs

	Group A	Group B	Group AB	Group O
Red blood cell type				
Antibodies in Plasma	 Anti-B	 Anti-A	None	 Anti-A and Anti-B
Antigens in Red Blood Cell	 A antigen	 B antigen	 A and B antigens	None

[ABO blood group system - Wikipedia](#)

Blood Drive/Blood Need

- Past Drives
 - Mercy Rehab OKC – 7 donors!
- Upcoming Drives
 - Mangum Regional Hospital & Community – April 28th

O NEGATIVE DONORS NEEDED!



Thank you

The End