

Infusion Type & Screen Form

(Legacy Fairview Only)

The patient presenting to your clinic/lab needs their blood drawn for an infusion appointment. This may be at a different M Health Fairview location than the one to which you normally send Blood Bank samples. Samples must be collected at a Legacy Fairview location, and infusion must occur at one of the listed locations below. There must be a future ABO/Rh Type and Screen (TYSC) order in Epic. Follow directions below to ensure that the sample is sent to the correct facility:

A. Lab/Collecting Staff: Fill out information below and complete Sections A through D.

Scheduled Infusion Date: _____

Infusion Appointment Location: *(Send sample, form, and Epic order printout to the selected location.)*

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| <input type="checkbox"/> Clinics and Surgery Center (Minneapolis): Blood Bank: UMMC East Bank Core Lab – FINAL LAB Blood Bank (Phone: 612-273-5367) | <input type="checkbox"/> Southdale Cancer Clinic / Southdale Physicians Building (Edina): Blood Bank: Southdale Hospital Acute Care Lab (Phone: 952-924-5153) |
| <input type="checkbox"/> Adult Specialty Clinic and Infusion Center, Riverside Professional Building (Minneapolis): Blood Bank: UMMC West Bank Acute Care Lab (Phone: 612-273-4011) | <input type="checkbox"/> Clinics and Surgery Center (Maple Grove): Blood Bank: M Health Fairview Clinics and Surgery Center - Maple Grove (Phone: 763-898-1730) |
| <input type="checkbox"/> Pediatric Specialty Care Journey Clinic (Minneapolis): Blood Bank: UMMC West Bank Acute Care Lab (Phone: 612-273-4011) | <input type="checkbox"/> Northland Medical Center (Princeton): Blood Bank: Northland Medical Center Acute Care Lab (Phone: 763-389-6391) |
| <input type="checkbox"/> Ridges Cancer Clinic/Clinics & Specialty Cntr (Burnsville): Blood Bank: Ridges Hospital Acute Care Lab (Phone: 952-892-2085) | <input type="checkbox"/> Lakes Medical Center (Wyoming): Blood Bank: Lakes Medical Center Acute Care Lab (Phone: 651-982-7220) |

B. Collection Instructions:

1. If using Sunquest, order the test code "ALABEL" to generate a label and for tracking the specimen. If not, utilize a patient label from the chart (addressograph).
2. Print out a copy of the future ABO/Rh Type and Screen (TYSC) order to include with the specimen.
 - a. The future TYSC order should also have an "Order Comment" indicating where the sample needs to be tested. (e.g. "Send sample to UMMC East Bank for infusion at CSC (Minneapolis) on __/__/__")
3. Identify the patient by name (first and last) and date of birth or medical record number.
4. Draw a sample for the type and screen and label the specimen according to Blood Bank standards for transfusion. The patient and phlebotomist must verify the correct identifying information on the specimen, and both must initial the tube. Additionally, both must sign the bottom of this form, under **Section C** below.

If you have questions, please call the corresponding Blood Bank at the phone number listed below.

C. Lab/Collecting Staff & Patient: Sign and date after reading attestation below

I have verified the name and date of birth and/or medical record number on this specimen matches that of the person whose blood is in the tube.

Phlebotomist Signature: _____ Date: _____

Patient's Signature: _____ Date: _____

Send sample, this form, and Epic order printout to the lab at your site.

D. Receiving Instructions: Receive ALABEL ACCN. If only an addressograph/chart label is present, order an ALABEL in Sunquest for tracking purposes. Send the specimen (with this form + printed TYSC order) using the Coridian/shipping label designated for the Blood Bank location above.