

Equipment	Performance check	Frequency	Frequency of calibration
Temperature recorder ....	Compare against thermometer .....	Daily .....	As necessary.
Refrigerated centrifuge ..	Observe speed and temperature .....	Each day of use	Do.
Hematocrit centrifuge ....	.....	.....	Standardize before initial use, after repairs or adjustments, and annually. Timer every 3 mo.
General lab centrifuge ...	.....	.....	Tachometer every 6 mo.
Automated blood-typing machine.	Observe controls for correct results .....	Each day of use.	
Hemoglobinometer .....	Standardize against cyanmethemoglobin standard.	.....do.	
Refractometer .....	Standardize against distilled water .....	.....do.	
Blood container scale ....	Standardize against container of known weight.	.....do .....	As necessary.
Water bath .....	Observe temperature .....	.....do .....	Do.
Rh view box .....	.....do .....	.....do .....	Do.
Autoclave .....	.....do .....	Each time of use	Do.
Serologic rotators .....	Observe controls for correct results .....	Each day of use	Speed as necessary.
Laboratory thermometers.	.....	.....	Before initial use.
Electronic thermometers	.....	.....	Monthly.
Vacuum blood agitator ..	Observe weight of the first container of blood filled for correct results.	Each day of use	Standardize with container of known mass or volume before initial use, and after repairs or adjustments.

(c) Equipment employed in the sterilization of materials used in blood collection or for disposition of contaminated products shall be designed, maintained and utilized to ensure the destruction of contaminating microorganisms. The effectiveness of the sterilization procedure shall be no less than that achieved by an attained temperature of 121.5 °C (251 °F) maintained for 20 minutes by saturated steam or by an attained temperature of 170 °C (338 °F) maintained for 2 hours with dry heat.

[40 FR 53532, Nov. 18, 1975; 40 FR 55849, Dec. 2, 1975, as amended at 45 FR 9261, Feb. 12, 1980; 57 FR 11263, Apr. 2, 1992; 57 FR 12862, Apr. 13, 1992]

**§ 606.65 Supplies and reagents.**

All supplies and reagents used in the collection, processing, compatibility testing, storage and distribution of blood and blood components shall be stored in a safe, sanitary and orderly manner.

(a) All surfaces coming in contact with blood and blood components intended for transfusion shall be sterile, pyrogen-free, and shall not interact with the product in such a manner as to have an adverse effect upon the safety, purity, potency or effectiveness of the product. All final containers and closures for blood and blood components not intended for transfusion shall be clean and free of surface solids and other contaminants.

(b) Each blood collecting container and its satellite container(s), if any, shall be examined visually for damage or evidence of contamination prior to its use and immediately after filling. Such examination shall include inspection for breakage of seals, when indicated, and abnormal discoloration. Where any defect is observed, the container shall not be used, or, if detected after filling, shall be properly discarded.

(c) Representative samples of each lot of the following reagents or solutions shall be tested on a regularly scheduled basis by methods described in the Standard Operating Procedures Manual to determine their capacity to perform as required:

Reagent or solution	Frequency of testing
Anti-human globulin .....	Each day of use.
Blood grouping reagents .....	Do.
Lectins .....	Do.
Antibody screening and reverse grouping cells.	Do.
Hepatitis test reagents .....	Each run.
Syphilis serology reagents ....	Do.
Enzymes .....	Each day of use.

(d) Supplies and reagents that do not bear an expiration date shall be stored in such a manner that the oldest is used first.

(e) Supplies and reagents shall be used in a manner consistent with instructions provided by the manufacturer.

(f) Items that are required to be sterile and come into contact with blood should be disposable whenever possible.

[40 FR 53532, Nov. 18, 1975, as amended at 59 FR 23636, May 6, 1994]

**Subpart E [Reserved]**

**Subpart F—Production and Process Controls**

**§ 606.100 Standard operating procedures.**

(a) In all instances, except clinical investigations, standard operating procedures shall comply with published additional standards in part 640 of this chapter for the products being processed; except that, references in part 640 relating to licenses, licensed establishments and submission of material or data to or approval by the Director, Center for Biologics Evaluation and Research, are not applicable to establishments not subject to licensure under section 351 of the Public Health Service Act.

(b) Written standard operating procedures shall be maintained and shall include all steps to be followed in the collection, processing, compatibility testing, storage, and distribution of blood and blood components for transfusion and further manufacturing purposes. Such procedures shall be available to the personnel for use in the areas where the procedures are performed. The written standard operating procedures shall include, but are not limited to, descriptions of the following, when applicable:

- (1) Criteria used to determine donor suitability, including acceptable medical history criteria.
- (2) Methods of performing donor qualifying tests and measurements, including minimum and maximum values for a test or procedure when a factor in determining acceptability.
- (3) Solutions and methods used to prepare the site of phlebotomy to give maximum assurance of a sterile container of blood.
- (4) Method of accurately relating the product(s) to the donor.
- (5) Blood collection procedure, including in-process precautions taken to

measure accurately the quantity of blood removed from the donor.

(6) Methods of component preparation, including any time restrictions for specific steps in processing.

(7) All tests and repeat tests performed on blood and blood components during manufacturing.

(8) Pretransfusion testing, where applicable, including precautions to be taken to identify accurately the recipient blood samples and crossmatched donor units.

(9) Procedures for investigating adverse donor and recipient reactions.

(10) Storage temperatures and methods of controlling storage temperatures for all blood products and reagents as prescribed in §§ 600.15 and 610.53 of this chapter.

(11) Length of expiration dates, if any, assigned for all final products as prescribed in § 610.53 of this chapter.

(12) Criteria for determining whether returned blood is suitable for reissue.

(13) Procedures used for relating a unit of blood or blood component from the donor to its final disposition.

(14) Quality control procedures for supplies and reagents employed in blood collection, processing and pretransfusion testing.

(15) Schedules and procedures for equipment maintenance and calibration.

(16) Labeling procedures, including safeguards to avoid labeling mixups.

(17) Procedures of plasmapheresis, plateletpheresis, and leukapheresis, if performed, including precautions to be taken to ensure reinfusion of a donor's own cells.

(18) Procedures for preparing recovered plasma, if performed, including details of separation, pooling, labeling, storage, and distribution.

(19) Procedures under §§ 610.46, 610.47, and 610.48 of this chapter:

- (i) To identify previously donated blood and blood components from a donor who later tests reactive for evidence of human immunodeficiency virus (HIV) infection or hepatitis C virus (HCV) infection when tested under § 610.40 of this chapter, or when a blood establishment is made aware of other reliable test results or information indicating evidence of HIV or HCV infection;