TRANSFUSION MEDICINE PROTOCOLS

Checking Procedure: Pre Administration of Blood Products

This document should be read in conjunction with the Disclaimer

Contents

Aim

Describe the process and requirements for checking of patient identity and verification of the blood product and prescription pre administration. Blood Products is a generic term. Fresh Blood Products relates to Red blood cells, Fresh frozen plasma, cryoprecipitate and platelets. Plasma derived blood products refers to components such as Rh D immunoglobulin, Intravenous immunoglobulin, Albumin etc.

Introduction

Prior to the collection of any blood product the patient must be prepared and the following checks undertaken by clinical staff:

- The prescription has been satisfactorily completed.
- Informed consent has been obtained and the indication for transfusion has been documented in the patient's medical/clinical record, for non –emergency transfusions (See Blood Product Prescription Consent and Refusal.).
- The patient has been assessed to determine whether it is appropriate to undertake the transfusion at the planned time.
- Patient has ID band securely fixed to their person as per WNHS Patient Identification Policy.
- Intravenous access is appropriate and patent.

- Any pre-medication prescribed for the patient has been administered, and at a suitable time before the transfusion commences to allow it to be effective.
- Appropriately trained and competent staff are available for the duration of the transfusion, including two staff to perform the blood product and patient identity checks at the patient's side.
- Appropriate equipment is available as required. All fresh blood components (Red cells, Fresh frozen plasma, cryoprecipitate and platelets) must be administered by Gravity or Plum A+ Pump or a rapid infuser validated for blood products (in Anaesthetics). Fresh products are administered through a blood administration set (with 170-200 micron filter), to remove clots and debris. The Plum A+ approved tender electronic infusion pumps have been verified as safe to use for this purpose according to the manufacturer's instructions. The pressure setting must never exceed 300mm/Hg. Blood warmers for infusion of fresh blood products are only required in patients with cold agglutinins or rapid blood product flow rates (adults flow rates > 50 mL/kg/hr, infants – flow rates of >15 mL/Kg/Hr) and exchange transfusions. For more information refer to Transfusion General Practices and Equipment.

Checking procedure for blood products

- This check is vital for ensuring that the **right blood** is given to the **right patient** to prevent fatal errors.
- Two staff members (one of whom must be a doctor or registered nurse or midwife) must perform the check at the patient's side **immediately** prior to administration. The second checker can be an anaesthetic technician or other appropriately trained and authorised staff member.
- See WNHS Pharmacy Medication Checking and Administration and KEMH Blood Transfusion Checking Procedure pictorial guide.
- The person spiking/hanging or administering the blood product must be one of the two staff members who have undertaken the blood and patient identity check. The pack must not be spiked or drawn up until the identity check of patient and blood product is complete and the time and circumstances are considered appropriate to commence administration. The product must be commenced immediately after the check has been completed. If there is a delay, the checking process must be repeated.

The following checks must be carried out at the patient's side:

Confirmation of patient identity

- Check the Identity Band (ID) band is securely attached to the patient's body. Blood products must **NOT** be infused in the absence of a hospital identity band attached to the patient. Refer to Women & Newborn Health Service Patient Identification Policy
- Ask the patient (if conscious and able) to state and spell their family name and given name in full, and date of birth (D.O.B.) If the patient is unable to state and spell their name, ask a parent, guardian or career (if present and able to do so) to verify the patient's identity.

- Ensure the stated full name and D.O.B. are identical to those on the ID band.
- Ensure that ALL details on the ID Band (full name, D.O.B., medical record number) are:
    - Identical to those on the prescription &
    - Identical to those on the PathWest blood product compatibility sticker

Blood Product Checks

- Donation number/ batch number on the patient compatibility label are identical to that on the blood product label
- Blood product type is the same on the prescription, on the product and the patient compatibility label.
- Special product requirements on the prescription are met (e.g. Irradiated, CMV negative).
- For fresh products such as Red cells, FFP, Cryoprecipitate and Platelets check the blood group and donation number on the patient compatibility label is identical to that on the pack label. Then check the label to ensure the blood group on the pack label is identical to the blood group of the patient as stated on the label.
- Blood Product has not passed its expiry date and time.
- Blood Product has no signs of leakage, damage, clumping of the contents, evidence of haemolysis, discolouration or turbidity.
- **WARNING** **DO NOT proceed** if any discrepancies are found during the checking process. Contact TMU immediately if any defects are found, if there is any concern regarding the integrity of the product or if unsure of compatibility.

Documentation

- When the checking procedure has been completed and deemed correct:
- Affix the peel off PathWest compatibility sticker to the Blood Transfusion Record (MR735) and place in the patient's medical record.
- Both staff members sign the Blood Transfusion Record (MR735) confirming the patient and product check has occurred.
- Document date and time of commencement.
- On completion the stop time must also be completed.

WARNING The clinician or nurse responsible for the infusion must ensure that blood is set up for infusion within 30 minutes of removal from a monitored blood fridge. If infusion is delayed, it may not be suitable for clinical use. Inform TMU immediately and follow instructions given. For Anaesthetic Patients red cell units may be logged into the monitored theatre satellite blood fridge within initial 30 minutes.

References

- Australian & New Zealand Society of Blood Transfusion (ANZSBT) & Royal College of Nursing Australia (RCNA) Guidelines for the Administration of Blood Products 2nd Edition, December 2011 http://www.anzsbt.org.au/publications/index.cfm#societyg
- ANZSBT Guidelines for Pretransfusion Testing, 4th Edition, ANZSBT, 2007 http://www.anzsbt.org.au/publications/index.cfm#societyg
- Consent to Treatment Policy Appendix 7F
- British Committee for Standards in Haematology, Blood Transfusion Task Force. The Administration of blood and blood components and the management of transfused patients. Transfusion Medicine; 1999. 9: 227-238.
- Blood Transfusion: crucial steps in maintaining safe practice. BNJ; 2000. 9(3): 135-138.Bradbury, M Cruickshank, J.
- Australian Red Cross Blood Service – Blood products and transfusion practice for health professionals. http://www.transfusion.com.au/
- Flippin' Blood BloodSafe SA / ARCBS Second Edition June 2012 http://resources.transfusion.com.au/cdm/ref/collection/p16691coll1/id/20

Related policies

- National Safety and Quality Health Service Standards, October 2012. Standard 7: Blood and Blood Products

Related WNHS policies, procedures and guidelines

- Neonatal Policy Transfusion
- KEMH Blood Transfusion Checking Procedure
- WNHS Transfusion Medicine Blood Product Prescription Consent and Refusal
- Women & Newborn Health Service Patient Identification Policy
- WNHS Transfusion Medicine: Blood Product Prescription Consent and Refusal
- WNHS Transfusion Medicine: General Practice and Equipment
- WNHS Pharmacy Medication Checking and Administration

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