

Manitoba Transfusion Best Practice Resource Manual

Section 4 Competency Requirements

Blood Administration Return Demonstration

Facilitator States - The physician informs you that your patient requires 1 unit of red blood cell to be administered now.

Element	✓ If Competent
<p><u>Physician Order</u></p> <p>Facilitator states –_What is your first step? Confirm order Does it contain all the required information? If all the order information is present what are you checking to see is on the chart? They may say consent but in addition to that an In-date Type and Screen is needed.</p> <ol style="list-style-type: none"> 1. Confirm presence of physician order documented on patient chart. 2. State physician order requirements- date, time, required blood product, quantity of product to be transfused, volume/duration of transfused product, pre and post medications. 3. Check to see if patient has a valid Type & Screen result on patient chart. If not, obtain a physician order to collect a Type & Screen on patient. <p>Have participant show you in the chart the in-date type and screen and the form that would be used to collect a type and screen if there wasn't one.</p>	
<p><u>Informed Consent</u></p> <p>Facilitator states -_How do we know that informed consent has been given?</p> <ol style="list-style-type: none"> 1. Confirm that informed consent has taken place with patient and conversation has been documented on health record by physician. <p>Show participant the two separate types of consent 1) consent for treatment 2) surgical consent that includes transfusion</p> <p>Ask participant what would happen if the person had a total knee replacement but the transfusion was required because the patient developed an unrelated GI bleed, is the surgical consent for blood still good? Answer: No, stress the importance of discussing consent with the patient as patient may not realize that they have given consent for transfusion by signing the surgery consent. If they were unaware a</p>	

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<p>discussion between physician and patient would be necessary.</p> <p>2. Nurse proceeds to bedside and informs patient that a transfusion will occur soon. Ask patient if they have any concerns related to this procedure. Confirm directly with patient that they agree to proceed with transfusion. Show participant pamphlet they can use.</p>	
<p><u>Obtain Blood From Blood Bank</u></p> <p>Facilitator states – Before we request the red blood cells what else besides consent and an in-date type and screen do we have to ensure we have and what do we need to do? Have them check patency of IV and set up the equipment.</p> <p>1. Nurse starts IV and/or check's patency of existing IV. Nurse establishes and primes blood administration set. Ensure that an additional IV set, if there is no primary IV and normal saline, is in close proximity to patient's bedside in the event of a transfusion reaction.</p> <p>Facilitator states – How do we get the red blood cells from the lab? Have them look over the request for release form. Instruct them that they would fill it out and ask what is the procedure for sending and making the lab aware?</p> <p>2. Nurse completes Request for Blood Release form and faxes it to Blood Bank and calls the Blood Bank or delegates this task to ward clerk to complete.</p> <p>Facilitator states – You have now received the unit of red blood cells from the transporter HCA.</p> <p>3. Nurse receives blood from transport personnel.</p> <p>Facilitator states – What is the maximum length of time that blood can be out of the refrigerator? EMPHASIZE 30 Mins! What would you do with the unit if the IV has gone interstitial and blood cannot be initiated prior to deadline?</p> <p>4. Nurse identifies the maximum length of time that blood can be out of the refrigerator prior to initiation on patient. Nurse identifies what to do if blood cannot be initiated prior to deadline. Blood is returned to Blood Bank ASAP!</p>	
<p><u>Pre Transfusion Checks</u></p> <p>Facilitator States - Before transfusion what do we observe the unit of red blood cells for?</p> <p>1. Blood is visibly observed for discoloration, sediment & expiry date.</p>	

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<p>Facilitator States - What two nurse pre-transfusion checks are required?_Perform these checks with another participant as outlined at the beginning of the session.</p> <ol style="list-style-type: none"> Blood is checked for accuracy with the Physician’s order and with the patient’s Type and Screen Report (Transfusion Medicine Results Report). Confirm accuracy of patient’s personal health information by performing 2 nurse check. First step is two patient identifiers. Second step is comparing component tag information with information on chart records. <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;"><u>Person 1</u> Reads aloud from the Component / Derivative Tag:</th> <th style="text-align: center;"><u>Person 2</u> Compares and verifies the information on both with:</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> Two patient identifiers First and last name (letter by letter) PHIN or unique identifier ABO/Rh Product modifiers and/or alerts (patient antibodies) </td> <td> <ul style="list-style-type: none"> Confirms two patient identifiers Admission Sheet/Emergency Dept. (ED) record The Transfusion Medicine Results Report (Type and Screen Report) or the Record of Transfusion (ROT) </td> </tr> </tbody> </table> <ol style="list-style-type: none"> Third step is compare information on blood bag with information on derivative tag and record of transfusion. Facilitator – Ask what you do with the tag now that you have confirmed the information Answer: Tag should be left in place for the duration of the transfusion. Once the transfusion is completed it is removed and placed in confidential waste. <p><u>Component / Derivative Verification</u></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center;"><u>Person 1</u> Reads aloud from the Component / Derivative Tag & Record of Transfusion:</th> <th style="text-align: center;"><u>Person 2</u> Compares and verifies the information on:</th> </tr> </thead> <tbody> <tr> <td> <ul style="list-style-type: none"> Product/component type Donor ABO/Rh, as applicable Donor unit # or Lot #, as applicable Compatibility status Crossmatch expiry date, unit expiry date Modifiers, if applicable. Example(s): CMV negative or irradiated </td> <td> <ul style="list-style-type: none"> Blood component bag / Derivative </td> </tr> </tbody> </table>	<u>Person 1</u> Reads aloud from the Component / Derivative Tag:	<u>Person 2</u> Compares and verifies the information on both with:	<ul style="list-style-type: none"> Two patient identifiers First and last name (letter by letter) PHIN or unique identifier ABO/Rh Product modifiers and/or alerts (patient antibodies) 	<ul style="list-style-type: none"> Confirms two patient identifiers Admission Sheet/Emergency Dept. (ED) record The Transfusion Medicine Results Report (Type and Screen Report) or the Record of Transfusion (ROT) 	<u>Person 1</u> Reads aloud from the Component / Derivative Tag & Record of Transfusion:	<u>Person 2</u> Compares and verifies the information on:	<ul style="list-style-type: none"> Product/component type Donor ABO/Rh, as applicable Donor unit # or Lot #, as applicable Compatibility status Crossmatch expiry date, unit expiry date Modifiers, if applicable. Example(s): CMV negative or irradiated 	<ul style="list-style-type: none"> Blood component bag / Derivative 	
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<p><u>Pre-Transfusion Check Continued.</u></p> <ol style="list-style-type: none"> 1. Ensure all equipment is ready for transfusion to begin. 2. Educates patient on expectations and signs & symptoms of transfusion reaction to report to nurse (transfusion reaction S&S). Show Pamphlet that they can use 3. Nurse confirms vital signs are appropriate to begin treatment and starts treatment <p>Facilitator: At this point set up should be done and now participants will switch.</p>	
<p><u>Initiation of Transfusion</u></p> <p>Facilitator: Have participant start infusion and have participant state what rate they are starting the transfusion at.</p> <ol style="list-style-type: none"> 1. Nurse starts transfusion and states initial rate and when rate would increase. <p><u>Continuous Observation of Patient During First 15 mins of Transfusion</u></p> <p>How often do you do transfusion checks including vital signs?</p> <p>Facilitator asks what are signs and symptoms of transfusion reaction. Facilitator then states that after 15 mins you did your routine vitals and your patient's temperature when up a degree and they now have a rash. What will you do?</p> <ol style="list-style-type: none"> 1. Nurse can state signs & symptoms of a transfusion reaction. 2. Nurse can describe immediate steps to complete if patient experiences an acute transfusion reaction. Nurse demonstrates how he/she will report the adverse event (if it occurs) and documentation of same. 	
<p><u>Documentation Required for Transfusions</u></p> <p>Facilitator asks where does documentation of the transfusion occur and what is documented?</p> <ol style="list-style-type: none"> 1. Record of Transfusion is completed and returned to Blood Bank at earliest opportunity after infusion has started. . 2. Cumulative Blood Product Record is completed as per hospital standards. 3. Patient Notification Card is completed by nurse and given to patient. 	
<p><u>Patient Education</u></p>	

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<ol style="list-style-type: none"> 1. Informs patient of signs & symptoms of a delayed transfusion reaction. An educational pamphlet is provided to patient upon leaving the hospital if the patient is an outpatient. 2. Nurse advises and encourages outpatient to remain on the unit for 1 hour post-transfusion for observation of a potential adverse reaction. 3. Patient Notification card is provided to patient at discharge indicating administration of blood and/or blood products during their hospitalization. 	

Name: _____

Unit: _____

Date: _____