

# Cumulative Blood Product Record Completion Guideline

# 1.0 Form Purpose

The purpose of the Cumulative Blood Product Record is to provide a standardized documentation format and record of blood, blood components and derivative transfusion/infusion.

- 1.1 All blood, blood components and derivatives administered to a patient shall be recorded on the CBPR. Vital signs may be recorded on appropriate flow sheets in use on the unit.
- 1.2 Any transfusion reactions and medical/nursing interventions shall be documented on the CBPR, as applicable and if necessary supplemented in the Integrated Progress notes.

## 2.0 Definitions

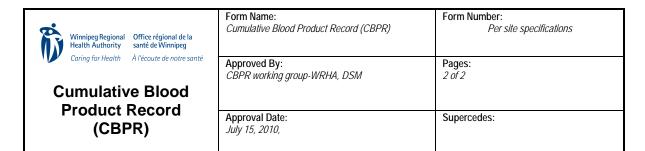
Cumulative Blood Product Record (CBPR) – a regional health record form which is mandatory for facility staff to complete when blood and blood products are being transfused/infused on an in-patient or an out-patient. The form content is consistent with the Manitoba Transfusion Medicine Best Practice Resource Manual for Nursing and the Manitoba Transfusion Reaction Algorithm.

## 3.0 Used By

3.1 Staff authorized to administer blood, blood components and derivatives in accordance with established site policies and procedures at the following sites Concordia Hospital, Deer Lodge Centre, Health Sciences Centre, Misericordia Health Centre, Riverview Health Centre, St. Boniface Hospital, Seven Oaks General Hospital, Victoria General Hospital, Grace Hospital.

## 4.0 Guidelines for Completion of CBPR

- 4.1 Documentation shall be completed throughout the transfusion/infusion according to site policies and procedures.
- 4.2 The CBPR shall be addressographed with patient identification.
- 4.3 Pre-transfusion actions shall be completed in accordance with site policies and procedures including the WRHA Informed Consent Policy #110.000.005.



- 4.3.1 Upon completion of the Pre-transfusion Actions the box marked pre-transfusion actions shall be checked.
- 4.3.2 If any action is not completed (NC) shall be documented in the Pretransfusion Action column. Specific actions that are not completed along with the reason(s) in the intervention column shall be documented.
- 4.4 The date and time of any interventions shall be documented in the date and time columns.
- 4.5 The type of blood products established shall be recorded using the reference key for the appropriate acronym. Blood products not referenced on the key may be sourced from site specific guidelines.
- 4.6 The blood group and Rh of the product shall be documented and are found on the blood product label.
- 4.7 The donation number or lot number shall be recorded as appropriate. Identifier stickers on the bag may be affixed to the form, otherwise information shall be handwritten to include all 16 digits. The manufacturer is documented in this section as applicable.
- 4.8 Assessments shall be recorded according to parameters listed in the assessment key. Any other observations shall be documented in the intervention column and/or IPN.
- 4.9 Interventions documented shall include assessments, symptoms, intervention, initiation and completion of transfusion.
- 4.10 Signatures of 2 people including the full name and classifications are required when establishing the blood product as per Manitoba Transfusion Medicine Best Practice Resource Manual for Nursing.
- 4.11 A Blood Product Patient Notification Record shall be completed by the staff upon transfer or discharge from the facility. This includes checking off all types (not amounts) of blood products transfused/infused. The record shall be provided to the patient and/or family member or designate. A check mark and signature on the on the CBPR form shall be completed by the person providing the Blood Product Patient Notification Record to the patient. For patients receiving frequent transfusions one Blood Product Patient Notification Record may be updated or initiated to include multiple visits.

#### 5.0 Filing/Routing Instructions

5.1 CBPR must be permanently retained in the facility health record.