

MB Guideline 3

Receipt of Blood, Blood Components and/or Plasma Protein Products

1.0 Purpose

- 1.1. To provide best practice guidelines for nurses that align with the standards set forth by the American Association of Blood Banks (AABB) and the Canadian Society of Transfusion Medicine (CSTM) for the receipt of blood, blood components and/or plasma protein products.
- 1.2. The standards state that:
 - a. Blood, blood components and plasma protein products must be visually inspected and that the inspection is documented. If abnormalities are present this should be documented in the health record.
 - b. When an abnormality is detected the blood, blood component and/or plasma protein products shall be quarantined until appropriate disposition is determined.

If the expiry date is day/month/year, the product expires at midnight on that day.

If the expiry date is month/year, the product expires at midnight on the last day of the month.

2.0 Policy for Receipt of Blood, Blood Components and or Plasma Protein Products

- 2.1 Inspection of products should occur upon receipt from the blood bank or another facility and in the event of a suspected transfusion reaction. This includes:

- 2.1.1.1 Visual inspection of product
- 2.1.1.2 Confirmation of expiry dates
- 2.1.1.3 Product identifiers on label

For return of products failing visual inspection see [Appendix 12 Visual Inspection](#)

- 2.2** Products shall be delivered to patient care areas by personnel trained in the transportation of blood. See [DSM policy 160-INV-17](#) regarding training for transportation of blood products.
- 2.3** Products should not be delivered to an unattended area.
- 2.4** Two person verification shall be performed upon receipt and prior to administration of blood products. The 2 person verification should include a comparison of the TMRR to Blood component bag, issue tag and ROT (if applicable).
- 2.5** Confirmation of physicians order should be repeated once blood, blood component, or plasma protein product arrives in clinical care area.
- 2.6** Initiation of transfusion must begin within 30 minutes of receipt of blood, blood component in the clinical care area.

If the blood, blood component or plasma protein product fails visual inspection contact blood bank for instruction on returning product.

Refer to [DSM policy 160-INV-12](#) for quarantine procedure if applicable.

Notify physician if there is a delay in transfusion because of failed visual inspection.

3.0 Documentation

- 3.1** Two person verification is documented by two signatures on the Cumulative Blood Product record (CBPR). See [Appendix 6 Cumulative Blood Product Record Completion Guide](#)

4.0 Quality Control

- 4.1** A formal competency assessment program shall be in place for all personnel involved in the transfusion process.

4.2 Occurrences regarding blood products damaged in transport, failed visual inspection or returned to blood bank if not transfused should be reported according to facility policy.

5.0 Notes/Special Considerations

5.1 See [Appendix 12 Visual Inspection](#)

5.2 See [CBS Visual Assessment Guide](#)
https://profedu.blood.ca/sites/msi/files/VAG_en.pdf

Facility endorsement if guideline is used as Standard Operating Procedure (SOP)

Approved by: _____
(Senior Management) (Senior Management)

Facility effective date: _____
(Date of implementation)