MB Guideline 5

Administration of Plasma Protein Products

1. 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 administration of Plasma Protein Products (PPP's), previously known as derivatives.

Examples of PPP's include, but are not limited to: Albumin, Anti-inhibitor Coagulant, ATIII, C1 Inhibitor, Factors VII-XIII, Recombinant Factors, Fibrinogen, Immune Globulins, Protein C, and Prothrombin Complex Concentrates

1.2. The standards state that a protocol/policy is required for the administration of plasma protein products (PPP's). This includes the use of infusion devices and ancillary equipment, and the identification, evaluation, and reporting of adverse events related to transfusion (Standard 7).

2. Policy

2.1. Health care facilities/RHAs in Manitoba must implement processed and procedures that include informed consent, physician orders, administration and documentation as well as reporting of adverse events associated with these products.

2.2. Ensure direct venous access for administration

The nurse will ensure informed consent for any blood, blood components and/or plasma protein products have been obtained by the physician/authorized practitioner before administering any product.

2.3. Transfusionist and one other authorized provider will verify the following:

a. The order which includes:

- Intended recipient's two independent identifiers: Unique identifier and first & last name,
- PPP and dosage required
- Date and time of the infusion
- Rate or duration of the infusion
- Modification or special requirement to product if applicable
- If multiple products to be infused, indicate the sequence, and
- Clinical indication for infusion

b. Donation identification number/product lot number

c. The product has not expired

d. Positively identify the recipient and match the PPP to recipient. *Refer to MB Guideline 2.*

2.4. Inspect the product for leakage, discoloration, and/or abnormalities. If product fails visual inspection contact the blood bank immediately. *See Appendix 12 Visual Inspection.*

2.5. Explain the procedure to the patient and to report signs/symptoms of adverse reaction(s) immediately.

2.6. Assess the patient for symptoms prior to the infusion that might be confused with a transfusion reaction and document same (i.e. fever, rash).

Information regarding the administration set, infusion rate and common side effects can be found in the individual product monographs.

2.7. Administration sets should be changed:

a. After maximum 4 hours,

b. Between different products, or

c. Administration set becomes occluded.

2.8. Medications must not be added directly to PPP's or to the administration set during infusion.

2.9. Transfusion of blood and/or blood components should be initiated at a slower rate and patient monitored for first 15 minutes for signs and

symptoms of an adverse reaction (recommended initial rate of 50ml/hour). If no reactions after 15 minutes proceed to ordered rate of transfusion.

2.10. Patient must be monitored throughout the infusion for adverse reactions. Post infusion monitoring is at the discretion of the person administering the infusion.

2.11. Information regarding potential post infusion adverse effects must be provided to the patient prior to being discharged. *See appendix14 & 15 for information for patients.*

3. Documentation

3.1. Documentation in the patients' health record should include the following *See Appendix 6 Cumulative Blood Product Completion Guide and sample*:

- **a.** Order from physician/authorized provider
- **b.** Informed consent
- **c.** Name of product
- **d.** Donation/lot number
- **e.** Amount infused
- **f.** Rate of infusion
- **g.** Two authorized provider signatures verifying two person check
- **h.** Response to infusion
- **i.** Any education provided related to infusion

4. Quality Control

4.1. Health care facilities and RHA's in Manitoba should implement a quality improvement system to monitor compliance with the policies for the administration of plasma protein products.

4.2. A competency program shall be established for all personnel involved in the transfusion process.

5. Notes/Special Considerations

5.1. Only approved infusion devices and ancillary equipment that meet provincial safety standards and are approved by Health Canada shall be used for transfusion.

5.2. Outpatient settings:

a. Patient should be monitored for adverse reactions until the infusion is completed. Post transfusion monitoring is at the discretion of the person administering the infusion.

b. Information regarding potential post infusion adverse effects must be provided to the patient prior to being discharged. *See Appendix 14 for information for patients.* *See Appendix 15 for information for patients*.

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

Approved by: _____ _____

(Senior Management) (Senior Management)

Facility effective date: _____

(Date of implementation)