fraserhealth

BLOOD COMPONENT & PLASMA PROTEIN PRODUCT ADMINISTRATION RECORD

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DIRECTIONS FOR USE:

- Record all blood component and plasma protein product transfusions on this record
- The serial number of the blood component and plasma protein product is found on the bag, box, vial or syringe. The sticker on the back of the blood component bag may be used.
- Blood components require two person verification check prior to transfusion.
- Plasma protein products require one qualified transfusionist to check prior to transfusion. Exception: Pediatric requires two person verification check.
- Identify if equipment (e.g., infusion pump, blood warmer or rapid infuser) is used. If blood warmer is used, document temperature setting.

Date (dd/mm/yyyy)	Time started	Component and product	Serial and lot number	Checked by (secondary checker) initials	Checked and administered by (transfusionist) initials	Equipment	Time finished
						☐ None ☐ Infusion pump ☐ Rapid Infuser ☐ Blood warmer: Temperature ____	
						☐ None ☐ Infusion pump ☐ Rapid Infuser ☐ Blood warmer: Temperature ____	
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Refer to the relevant procedure and resources on the Fraser Health Pulse (for Clinical Skills, Decision Support Tool, Fact Sheets)

Prior to Transfusion

Confirm:
- Blood component or product order is present
- Patient ID band is present and legible
- Consent is signed and on patient chart
- Dedicated patent IV access for transfusion
- Pre-transfusion patient blood sample is required and collected

Equipment:
- Blood Components require 170 to 260 micron filter
- Tubing should have no access ports
- Refer to blood product fact sheets for tubing requirements for plasma protein products and IVIg

Tubing Change Frequency
- Every 4 hours or 4 units *or*
- Between different components / products *or*
- Anytime flow is restricted by filter debris

Baseline Vitals and patient assessment should be done within 30 minutes prior to initiating the transfusion

Confirm blood component/product availability and request from Transfusion Medicine Laboratory (TML) via Order Entry (OE)
- Blood component/product should be requested immediately prior to the transfusion
- Blood component should be initiated or returned to TML within 30 minutes of issue

Visually check blood component / product:
if any abnormality found, contact TML immediately

Verification

Step 1 of 2

- Compare the information the blood component / product tag to the patient's chart: patient first and last name and unique identifier number (unit number). Also, verify:
  - Order for blood component and product
  - Completed informed consent for blood components and products
  - Completed ABO and Rh screen

Note:
- Blood components require **two-person verification:** the primary checker (transfusionist) must be the person initiating the transfusion.
- Plasma Protein Products require **one-person verification:** the person initiating the transfusion must perform the check.

Step 2 of 2

Immediately prior to transfusion and in the presence of the patient, **read aloud:**

Using patient ID band, verify it matches the component / product tag / label	Using component label, verify it matches the component tag
Compare this information from the blood component / product tag / label to the patient's ID band ○ Spell first and last name ○ Unique patient identifier Whenever possible have patient spell their first and last name and state their date of birth	Compare this information from the blood component or product label to the component or product tag ○ Component / product type ○ Unit number or lot number ○ Expiry date and time ○ ABO and Rh of patient and component. If different, TML explanation should be present ○ Special requirements (e.g. "irradiated" label)

If any discrepancies are noted, *do not proceed*. Contact TML immediately

Transfusion

Start transfusion slowly.
- Blood components initiation rate for non-urgent elective rates
  - Adult: 50 mL/hour (total volume: 12.5 mL in the first 15 minutes)
  - Pediatric: 1 mL/kg/h in the first 15 minutes (max 50 mL/h)
- IVIg and other plasma protein products: refer to blood product fact sheets

Remain with the patient and monitor for the first 5 minutes <u>once</u> the blood has reached the vein and observe for signs and symptoms (S&S) of a transfusion reaction.
- Monitoring and initiation rates should be repeated with each subsequent unit.
- *Exception:* IVIg does not require reducing rate with subsequent bottles (refer to fact sheet)
- *Exception:* Albumin does not require reducing the rate if lot numbers are the same.

Increase flow rate to the prescribed rate after 15 minutes if no S&S of transfusion reaction

Monitor vitals and perform patient assessment at a minimum frequency of:
- 15 minutes after initiating the transfusion
- Hourly throughout the transfusion
- Upon completion of the transfusion

Completion

Upon completion of Transfusion
- Flush the line with compatible IV solution: Minimal flushing volumes should be used for pediatrics and patients at risk for fluid overload. Max adult flush volume: 50 mL.
- Change add on needleless connector (if used).
- Document transfusion and any transfusion related events in the appropriate patient information record. Ensure this record is complete.
- Initiate a fluid balance record for all transfusions.
- Complete and return blood component tag (pink tag) to TML within 24 hours for all blood components.