



SCHHS BLOOD PRODUCT TRANSFUSION CHECKLIST

Every action must be completed at each stage of the transfusion

Complete Prior to Collection	Patient Clinical Record Documentation
	Transfusion Consent completed by medical officer (MO) (<i>Red Cells, Platelets and Plasma only - bags</i>)
	Medical prescription on Blood and Blood Products Prescription Form including: Page 1 - Completed information - national standards requirements and indications for Tx; Page 2 - Prescription requirements.
	Pre-Transfusion Observations (Baseline)
	Document TPR, BP & oxygen saturation.
	Intravenous (IV) Access
Collection of Blood Product	Collection
	Confirm blood product is ready to be collected on AUSLAB or phone Blood Bank / Transfusion
	Blood and Blood Products Prescription Form must be taken to the lab. At handover check: correct patient, correct product, expiry date, and special requirements with pathology staff member.
	Document date and time collected on transfusion report form.
	Transport blood carefully to ward/unit in a non-opaque bag or pillow slip (supplied by the ward).
	Commence transfusion within 30 minutes from collection (30 minute rule).
Prior to Commencement	Bedside Check – all patient and product information must match exactly
	Check correct patient, correct product, correct dose, expiry date, correct donation/batch number, blood group compatibility, and special requirements.
	Visual inspection of blood product to ensure no leaks, unusual discolouration or clots.
	Blood and Blood Products Prescription Form (<i>ensure "consent is sighted" box is ticked</i>)
	Administration check by 2 appropriate staff, one of whom must connect and spike the blood product Administering officer – signature 1 Checking officer – signature 2.
	Administration date and time.
Proceed with Transfusion	Observations (TPR, BP and O₂ saturation) – may differ with bottled products – refer to procedure.
	Completed within 4 hours of unit collection (bags) or 4 hours of piercing (bottles)
	Visual observation for the first 15 minutes. Document observations at 15 minutes.
	Hourly observations until completion.
	Post transfusion observations.
	Post Transfusion
Suspected Transfusion Reactions	Transfusion Reactions or Suspected Reactions
	Refer to Transfusion Reaction Chart and SCHHS Blood Product Administration Procedure.
	Stop transfusion immediately, leave giving set attached and keep cannula in-situ and patent.
	Monitor and document vital signs 15 minutely or as often as required.
	Re-check identification of the patient, blood product and compatibility.
	Notify medical officer.
	Notify Blood Bank/ Transfusion Service. (fractionated product suppliers and private blood suppliers must be notified of suspected reactions) Obtain and complete reaction forms as required: 1. Pathology Qld Transfusion Reaction Form 2. ARCBS (Australian Red Cross Blood Service) Transfusion Reaction form.
	Mild reactions: (temperature rise of 38°C to < 39°C with no other symptoms; or localised rash over <2/3 body). May be recommenced post medical officer review and once patient symptoms subside. Monitor closely for the initial 15 minutes. If reaction recommences cease transfusion and treat as a major reaction.
	Major Reactions: (temperature rise >38°C and other symptoms or ≥39°C with/without other symptoms; or rash over >2/3 body; or more than 1 single symptom) Collect all appropriate samples for investigation, i.e. blood samples, cultures, MSU and chest x-ray Return remaining blood product/bag/bottle and the administration set to Blood Bank/Transfusion
	Report all suspected transfusion reactions into PRIME CI database
Document patient reaction including symptoms, investigations, interventions, and outcomes	

