

TRANSFUSION CNC DRAFT **Blood Product Administration Competency Assessment**

Employee Name: _____

Date: ____ / ____ / ____

Preparing and Administering of blood products (circle below):	Ward/ Clinical area:
Packed Red Blood Cells Platelets Cryoprecipitate FFP	

	Competent Yes/ No/ Not applicable	Comments
Pre transfusion		
Documentation: <ul style="list-style-type: none"> • Able to locate policy/policy • IV order form completed • Blood Transfusion obs chart available • Blood transfusion sheet available 		
<i>Knowledge assessment</i> <i>Demonstrates knowledge of hospital policy for blood and blood product transfusion</i> <i>Explains allowable timeframe from receiving blood from unit to completion of administration of the unit</i> <i>Explains how to arrange for blood to be delivered to the clinical area</i> <i>Explains when to use leucocyte filter</i> <i>Explains why filter should not be flushed at completion of the transfusion</i>		
Personal <ul style="list-style-type: none"> • Cleans hands • Wears appropriate PPE • Complies with Infection Control Guidelines at all times 		

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	Competent Yes/ No/ Not applicable	Comments
<p>Blood component:</p> <ul style="list-style-type: none"> • Visually inspects blood product • Performs checking procedure with 2nd staff member <ul style="list-style-type: none"> ○ Pt ID – patient is asked to state full name, DOB, if conscious ○ Pt full name, DOB, UR No checked against ID band if unconscious or unable to respond ○ Patient details correct on blood transfusion sheet, blood pack and blood pack compatibility tag ○ ABO, Rh(D) and unit no are identical on blood transfusion sheet, blood pack and blood pack compatibility tag • Expiry dates checked • Signature of laboratory officer issuing the unit is the same on blood transfusion sheet and compatibility tag • Special transfusion requirements • The nurse documents <ul style="list-style-type: none"> ○ Both signatures of checking nurses, ○ date and time of commencement documented on blood transfusion sheet ○ iv order • If competent and able patient: nurse explains protocol one 		
Administration of Blood product		
<p>Equipment:</p> <p>Gathers and connects appropriate equipment</p> <ul style="list-style-type: none"> • (ie leucocyte depletion filter if needed) • blood administration set/ IV giving set with 170 – 200 micron filter • Imed pump 		
<p><i>Knowledge assessment:</i></p> <p><i>Explains actions to be taken if the signatures on the blood transfusion sheet and compatibility tag do not match</i></p> <p><i>Identifies when to use protocol 1 and protocol 2</i></p> <p><i>Explains how often observations are taken if 'observe with care' is noted in the laboratory comment section of the blood transfusion sheet</i></p> <p><i>Explains how often observations are recorded if following protocol one and if following protocol 2</i></p> <p><i>Outlines actions to be taken in the event of an adverse reaction</i></p>		

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<ul style="list-style-type: none"> • Ensures transfusion was commenced within 30 min of removal from fridge • Completed within 4 hrs commencement PRBC • (30 min) for platelets 		
Obs (BP, Temp, Pulse, Resp rate, O2 saturation at <ul style="list-style-type: none"> • Baseline, • 15 min • at completion of the unit 		
Post transfusion		
<ul style="list-style-type: none"> • Blood observation sheet signed, • Protocol A or B documented • Transfusion reaction letter entered • Duplicate of observation sheet and compatibility tag returned to pathology 		
Disposal of giving sets and empty transfusion bag in hazardous waste bag		
Transfusion documented in patients notes		
Professional attitude displayed towards patient at all times		