



A SELF-DIRECTED INFORMATION PACKAGE

Storage, collection and administration of blood products

Name:	
Ward:	
Campus:	
Date:	

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INTRODUCTION

Large numbers of Australians rely on blood products to support them through medical/surgical episodes or for regular transfusions to maintain health. All who are transfused expect that the decision to transfuse is appropriate, that the blood products are safe and that the transfusion process meets the highest standards. In recent times extraordinary steps have been taken to improve the safety of blood products. Evidence suggests that the major threats to patient safety from transfusion relates to errors in decision –making and in the way blood products are administered, rather than to inherent problems in the actual blood products.

As Division One Registered Nurses or Midwives you will be involved in the collection of blood group and crossmatch specimens and the administration of blood products to patients. It is vital that you are aware of not only the risks and benefits but that you are aware of the responsibility that accompanies the administration of blood products to a patient.

This self-directed learning package is designed to ensure that all Division One Registered nurses and Midwives employed by Western Health are familiar with the policies and procedures that inform the identification and labelling requirements when drawing blood for ABO Rh Grouping, Crossmatch and Cord Bloods, the collection, storage and administration of blood products and the identification and management of adverse reactions associated with blood product administration / transfusion.

The completion of this package is compulsory for all Division One Nurses and Midwives. Only those Division One Nurses and Midwives who have successfully completed the “Storage, Collection and Administration of Blood Products” learning package may administer or care for patients receiving blood products

References

WH Policy 23.5	Collection of Blood Samples for transfusion testing - ABO Rh grouping, Crossmatching, Cord Bloods, etc Coombs
WH Policy 23.6	Requesting, Collecting and Storage of Blood Products
WH Policy 23.3	Blood Product Administration
WH Policy 23.7	Adverse Reaction to Blood Transfusion
WH Policy 23.8	Intravenous Immunoglobulins
WH Policy 23.9	Nursing Management of patients receiving blood products

Additional reference

Australian Red Cross Blood Service Transfusion Manual – available on-line via WH shortcut to Red Cross Home Page – click on Clinical Information link.

1. Before drawing blood for an ABO Rh grouping, Crossmatch, Cord Blood, DAT/Direct Coombs specimen the patient's identity must be checked by:

1 _____
2 _____
3 _____

2. A patient identification (BRADMA) label may be attached to an ABO Rh grouping, Crossmatch, Cord Blood, DAT/Direct Coombs specimen tube.

TRUE FALSE

3. It is acceptable to pre-label specimen tubes for ABO Rh grouping, Crossmatching, Cord Bloods, DAT/Direct Coombs prior to taking the blood.

TRUE FALSE

Why / Why not

4. The Transfusion Laboratory requires a crossmatch be performed prior to the issue and transfusion of Red Blood Cells Why?

5. The person drawing the blood for ABO Rh grouping / Crossmatch does not have to be the same person who signs and dates the collectors declaration on the transfusion test / blood product request form and the specimen tube

TRUE FALSE

Why / Why not

6. If the patient having blood drawn for ABO Rh grouping, Crossmatching, does not have an Identification band on I can still take the specimen.

TRUE FALSE

7. The hospital Transfusion Laboratory will process the specimen if the details on the specimen tube and blood product request form are similar.

TRUE FALSE

Why / Why not

8. You are about to commence a transfusion of packed red cells when you discover that the IV access is not patent. There is no-one available to re-cannulate for at least 45 minutes – what should you do?

- A Put the unit in the ward fridge until the cannula can be replaced.
- B Return the unit to Transfusion Laboratory until the cannula can be replaced
- C Leave the unit at the patient's bedside so it can be started as soon as the cannula is replaced

9. Red cell products are stored in one of 3 designated refrigerators across Western Health.

Why is this and where is this refrigerator at the Campus you work?

- 10 It is a legal requirement that a record of transfusion of blood products is kept for 20 years. Why is this?

- 11 As long as I know the patient's name I can collect blood products from the Transfusion Laboratory.

TRUE FALSE

12 The maximum time a single unit of red cells can be infused over is:

13. Prior to commencing a transfusion what must be checked and who performs this check?

1.

2.

3.

4.

5.

6.

7.

8.

9.

14 Where must this pretransfusion check be done?

15 The greatest risk associated with transfusion of blood components is the administration of blood to a patient who is not the intended recipient.

TRUE FALSE

16 After arrival on the ward a unit of red cells must be commenced within _____ minutes

17 The transfusion of only 5–10ml of blood can result in an acute transfusion reaction.

TRUE FALSE

18 In the event of an adverse reaction associated with a transfusion I am required to complete an adverse event form.

TRUE FALSE

19 What emergency equipment must be at the bedside prior to starting an infusion of intravenous immunoglobulins?

20 Where can you find the NHMRC Guidelines on the appropriate use of Fresh Blood Products?

21 List five common signs / symptoms of a transfusion reaction

1

2

3

4

5

22 Intravenous Immunoglobulins (e.g. Intragam P) have different observation monitoring requirements to fresh blood products

TRUE FALSE

23 Bronchospasm and laryngeal oedema are symptoms of which type of transfusion reaction

- A Febrile nonhaemolytic
- B Circulatory overload
- C ABO incompatibility.
- D Anaphylactic.

24 If the patient already has an IV infusion running that is not Normal Saline this line can be used to infuse blood products

TRUE FALSE

25 It is time for the patient's scheduled IV antibiotic treatment while the blood product is running. It is essential it be given at this time. What do you do?

- A Inject the antibiotic into the sideline of the blood giving set while the product is in progress.
- B Attach a new saline line to the 3-way tap at the cannulae, stop the blood product infusion, and give it via the saline line.

Why / Why not

26 An acute haemolytic transfusion reaction occurs most frequently as a result of:

- A Bacterial contamination of the unit.
- B The patient having an allergic reaction.
- C The transfusion of ABO incompatible blood

Such reactions can be prevented by:

- 1 _____
- 2 _____
- 3 _____

27 Once spiked what is the maximum time for infusion of platelets & FFP?

- A Twenty minutes
- B 4 Hours
- C 6 Hours

28 For routine transfusions of fresh blood products the minimum requirements for monitoring and recording of observations are:

29 You have commenced a transfusion and the patient is complaining of “feeling hot” and a “bit strange”. Observations reveal that his temperature has risen from 36.7 °C to 38 °C since the transfusion was commenced. What do you do?

- 1 _____
- 2 _____
- 3 _____
- 4 _____
- 5 _____

30 Your patient has Dextrose 5% running and has been ordered two units of red cells. Can you infuse the blood concurrently with this infusion?

YES NO

Why / Why not

31 Your patient has a transfusion of red cells in progress. He wants to go outside with his visitors and enjoy the sunshine. What do you advise him and why?

32 Platelets should be kept between

- A 1°C and 6°C
- B 6°C and 10°C
- C At room temperature

33 The only correct way for warming blood is:

34 All blood products must be administered through a giving set with a 160 – 260 micron filter

TRUE FALSE

35 Baseline observations prior to commencing a transfusion are required because:

36 The purpose of a leucocyte filter is to remove contaminating leucocytes when transfusing cellular products. This filter must be used in addition to the standard giving set

When should you use one?

1 _____

2 _____

3 _____

4 _____

5 _____

37 Albumin does not require a blood product request form to be completed and does not need to be recorded in the patient's history

TRUE FALSE

38 When should you use a blood warmer?

1 _____

2 _____

3 _____

4 _____

5 _____

39 You are about to commence a second unit of red cells. The patient had no signs or symptoms of a reaction from the first unit – so will not have any with the second unit

TRUE FALSE

40 The details on the patient label on the blood product are different than those on the patient's identification band. What do you do?
