Part B: Audit of Transfusion Consent Practice 2022

Data collection tool

This tool has been designed to assist with data collection. Before use, please download the full audit questions, to understand the abbreviations used in the collection tool. (https://www.health.vic.gov.au/patient-care/blood-matters-program)

collection tool only – submit online

Audit number	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**
Pt age (yrs)										
Gender (M, F, I)										
Clinical specialty (Med, H/O, Surg, Ob, ICU, HDU, ED)										
Date of transfusion (dd/mm/yyyy)										
Products tx (Y, N)										
- RBC										
- Platelets										
- FFP										
- Cryo										
Consent found (Y, N)										
Yes, consent found										
Consent (specific form, generic, medical record, other)										
Date consent recorded (dd/mm/yyyy)										

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Audit number, cont	**1**	**2**	**3**	**4**	**5**	**6**	**7**	**8**	**9**	**10**
Duration of consent (None, admit, up to 12m, >1y but not indefinite, indefinite)										
Products included (Y, N)										
- RBC										
- Platelets										
- FFP										
- Cryo										
- Generic fresh components										
Pt received info on (Y, N)										
- reason for transfusion										
- risks & benefits of tx										
- risks or consequences not receiving tx										
- alternatives to tx										
- written information										
Who obtained consent (CMO, Reg, Intern, MO, NP, cannot identify, other)										
Consent signed by (pt, MTDM, unsigned)										
- If unsigned, is a reason provided (Y, N)										
- Specify reason										
Interpreter (not needed, Y, N, unknown)										
No consent found										
Reason documented (no explan, verbal only, emergency, other)										