BLOOD TRANSFUSION

Summary of information needed by new doctors joining SUHT

The Trust has a Blood Transfusion Policy, available on SUHTranet, which explains in detail the blood transfusion process at SUHT. The Transfusion Process is similar in most hospitals but there is some variation. The manner of ordering and prescribing may vary between hospitals. At SUHT we have very strict guidelines on the labelling of transfusion samples. Most elective procedures require only a group and antibody screen on a valid sample. **If you are going to work in an area that is considered to be a high user of blood components and products it is your professional responsibility to read the relevant parts of the SUHT Blood Policy, which can be accessed internally when you begin work.**

SUHT Blood Transfusion Process

1. Requests for blood group, antibody screen and cross-matched red cells must comply to the SUHT Blood Transfusion policy:
    - Use a blood transfusion request form and complete all sections.
    - Use addressograph label or handwrite clearly
    - Give exact reason for request (not pre-op) and relevant clinical diagnosis. **Check if *group & screen* only or *cross-matched blood* is required for the procedure.** See MSBOS on the back of the request card.
    - State quantity (refer to reverse of request form and Blood Transfusion Policy) and date & time cross- matched red cells are required.
    - Include the date, time and signature of the person authorising the sample.
    - Add the date, time and signature of the person taking the sample.
    - Ensure that the name of the requester and contact details are provided.
    - **24/7 service BUT for the routine samples aim for core hours 9am – 5 pm Urgent/Emergency – please phone to warn us**

2. **Pre-transfusion samples must be taken and labelled correctly.**
    - Sample size: - Adults = 6. mls EDTA
      -Paediatric sample 3.5 mls EDTA tube fill till 2 mls for< 5 yrs old
    - Identify the patient (verbally and/or wristband)
    - Take blood sample then label **at the bedside.** Label must be hand written with patient identification (PID), as stated on the wristband and request form.
    - The sample must contain the following information;
        - Pre-printed labels on the sample tubes are not accepted.
        - 7 points of patient identification are mandatory
            - First name (in full, spelt correctly)
            - Surname (in full, spelt correctly)
            - Date of Birth (DD/MM/YYYY)
            - Hospital number if known, or first line of address. **NOT the POSTCODE only.**
            - Gender of patient
            - Date and time sample was taken
            - Signature of person taking the sample.
    - Contact laboratory if the request is urgent then transport accordingly. BT lab. ext. 4620
    - **Warning** – Blood Transfusion laboratory (BT) **will** reject inadequately or incorrectly labelled samples, but will contact you (or ward). We have a zero tolerance policy.

3. Prescription of Blood components/products must comply with SUHT Blood Transfusion Policy.

   Note: some products and quantities may need to be authorised by a Haematology SpR or Consultant

4. Response to an Adverse Reaction associated with a Blood Transfusion: STOP TRANSFUSION !!
   - Refer to 'Adverse Reaction to a Blood Transfusion' poster, available in all clinical areas. The poster indicates clearly how to recognise and manage a Mild (acute), Moderate-Severe (acute) and Delayed reaction.
   - For moderate – severe reactions always contact a clinical haematologist and inform Blood Transfusion laboratory.

7. Before prescribing a blood component/product (Non-emergency)
   - **Informed consent**: The clinical need for the transfusion of blood components/products must be discussed with the patient.
     - The patient should be told the risks and benefits of receiving a blood transfusion
     - Possible alternatives should be discussed.
     - The clinical need must be recorded on the Transfusion Record (POP) kept in the patient's notes
     - The patient must be given the **NHS leaflet 'Receiving a blood transfusion'**, if they have not already received one.
     - In the case of children, the parent(s) or responsible carer must be given the information.
   - Discuss alternatives to blood.

Consider thresholds for haemoglobin concentrations taking into account the patient's clinical condition. Discuss decision to transfuse with senior clinician.

N.B. For further information read the Blood Transfusion Policy on the SUHTranet **(strongly recommended).**

Useful websites

www.transfusionguidelines.org

www.blood.co.uk

www.bcshguidelines.org