

Blood Transfusions

Since blood is an especially enriched media which is not pasteurized, special considerations regarding the administration of blood and its components are necessary in order to ensure a safe transfusion.

TRANSFUSION OF BLOOD

Blood and blood components shall be maintained in a controlled environment at optimal temperature between 1 and 6 degrees centigrade.

- All blood products shall be transfused through an approved sterile, pyrogen-free transfusion set specific for blood products, and which has a filter capable of retaining precipitates and/or microaggregates.
- The transfusion tubing and filter set should be changed at least every 2 units of blood or every 4 hours, whichever occur first.

SKIN/ACCESS

Scrub skin 30 seconds with an iodophor. Use aseptic technique appropriate for type of access used.

COMPATIBLE SOLUTIONS

Normal saline is the only compatible solution which may be used in conjunction with blood transfusion. Other solutions are not to be added to the unit or IV line through which blood is transfused.

MEDICATIONS

Never add any medications to blood.

MONITORING

The patient's vital signs must be taken and recorded prior to transfusion so that a baseline is available in the event of suspected hemolytic, febrile, or allergic reaction; and repeated again at 15 minutes after the start of the transfusion.

BLOOD ADMINISTRATION

Blood transfusion must be initiated within 30 minutes of issue from the Blood Bank, and administered over a 1 to 4 hour period (unless specified otherwise by the physician). Due to the risk of contamination of the blood, 4 hours is the maximum allowable transfusion time.

Additionally, the patient should be closely observed for the first 15 minutes during administration of blood or blood products for any changes in behavior or vital signs, which could be interpreted as evidence of a transfusion reaction.

REACTIONS

If a transfusion reaction is suspected, discontinue the transfusion, maintain the IV with normal saline, notify the patient's physician and the Blood Bank. Recheck all clerical information and insure the patient was identified correctly. Provide two (2) large pink top tubes to the Blood Bank along with first available urine, the blood product, and the complete infusion set. Provide symptomatic treatment of patient as ordered. Initiate transfusion reaction workup.