5 RECEIPT OF BLOOD COMPONENTS
AT THE BEDSIDE

5.1 GENERAL CONSIDERATIONS

- Only one unit of red cells at a time should be removed from a blood fridge unless extremely rapid transfusion of large quantities of blood is required.

- The clinician or nurse responsible for the infusion must ensure that blood is set up for infusion within **30 minutes** of removal from a monitored blood fridge.

- The blood component should be immediately connected to the blood transfusion giving set and an intravenous line should already be in-situ.

- If the infusion is delayed, inform Blood Bank immediately. Components must be returned to Blood Bank within **30 minutes** of issue. Alternatively, red cell units may be logged into a monitored satellite blood fridge within this initial 30 minutes.

- Infusion of fresh blood products should be **complete** within 4 hours of removal from controlled storage.

The ANZSBT Guidelines for the Administration of Blood Products (2011) acknowledges that *In certain clinical conditions such as transfusion of neonates, where a slow infusion rate is indicated, transfusion MUST be completed within four hours of commencement and no longer that four and a half hours following the release of the blood product from controlled storage.*

**WARNING:** If blood is out of a blood fridge for more than 30 minutes and infusion is not commenced, it is no longer suitable for clinical use.

Inform Blood Bank, clearly label the blood “Out of fridge” and return immediately for disposal.