6.1 Bedside Procedure

The bedside pre-transfusion check is vital for ensuring that the right blood is given to the right patient to prevent potentially fatal errors. Two staff members should perform the bedside check. These staff should be medical officers, registered nurses or midwives, anaesthetic technicians or other appropriately trained and authorised staff. At least one of the staff members undertaking the check must be a medical officer, registered nurse or midwife.

The person spiking/hanging the blood product must be one of the two staff members who have undertaken the blood and patient identity check. This responsible person must ensure that blood is set up for infusion within 30 minutes of removal from a monitored blood fridge.

The pack should not be spiked until the identity check of patient and blood product is complete and the time and circumstances are considered appropriate to commence the transfusion. The pack must be spiked and commenced immediately after the check has been completed. If there is a delay, the checking process must be repeated.

Check for consent
Check the prescription in the medical record and verify all requirements are met:

- Date and time
- Type of blood component to be given.
- Quantity to be given.
- Duration of infusion.
- Any special requirements e.g. Irradiation, CMV Negative, etc.

Visually inspect the component for:

- Abnormal appearance, haemolysis discolouration or turbidity.
- Clot formation.
- Damage or leakage.

The patient MUST be positively identified by:

- Asking the patient (if conscious and able) to spell their surname and given names and state their date of birth (the parent/legal guardian may undertake this responsibility)
- Checking the hospital identity band that is securely fastened to the patient

Blood must NOT be infused in the absence of a hospital identity band attached to the patient
DO NOT use the bed label as ID

Transfusion shall not commence until the following have been checked and found to be correct:

- Patient’s surname, given name(s), UMRN or DOB on both the patient’s identification band and the PathWest compatibility label
- Donation number, blood group and component type on the Blood service unit label and the attached PathWest compatibility label.
- The expiry date of the unit.
- The component complies with special requirements on the prescription e.g. Irradiated, CMV Negative, etc.

For a pictoral guide view the KEMH Blood Transfusion Checking Procedure

If there are any discrepancies or the unit has any defects DO NOT transfuse the unit. Contact the Blood Bank immediately.

The peel off ID section of the bag/product label should be removed and placed in the patient’s medical record on the Blood Transfusion Record Form (MR735). The two individuals carrying out the check must both sign the relevant signature boxes on the MR735 confirming the patient and product check has occurred. The date and time of start of infusion must also be recorded. On completion the stop time must also be completed.

For Education - An aid to visual inspection of Blood Products may be found at the following link

Visual Inspection Guide Adapted from American Red Cross Website

Autologous blood has an ARCBS autologous blood label in addition to the compatibility label, which must also be checked.

SEE SECTION 7 ADMINISTRATION OF BLOOD TRANSFUSIONS

SEE SECTION 8 CARE AND MONITORING OF TRANSFUSED PATIENTS