
Section G: Issue and Receipt of Blood Products

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I. Basic Rules

1. Only one unit will be issued per patient, at one time, unless more than one infusion line is being used.
2. Transport product to patient care area immediately upon receipt from the BTL.
3. Begin infusion immediately upon delivery of product to patient care area.
4. Do NOT store blood product in refrigerator on the patient care area, as the temperature is not appropriately monitored for blood products.
5. Return unit to BTL immediately if transfusion cannot be started.
6. ALL not transfused blood products MUST be returned to BTL in order to properly update the patient transfusion history.

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II. Pre-Issue Checklist

Prior to obtaining Blood from the BTL, check the following:

1. Physician's orders including blood component required, amount, rate of infusion, as well as other specific instructions such as pre-medication and/or post-medication orders.
2. Informed consent for transfusion signed by patient. Patient's questions and/or concerns regarding the purpose and process of transfusion have been addressed.
3. Current specimen available (if required).
4. Product available in the BTL.
5. Armband on patient (if armband is inaccessible or removed, a procedure must be in place to ensure unequivocal identity of the patient before the transfusion is started).
6. Intravenous (IV) access established with blood administration set.

III. Issue of Blood Products from the BTL

1. Cerner available: PickUp order entered electronically

1. The blood product order must be entered in Cerner before the PickUp order is requested. To review how to place orders for blood products in Cerner, please refer to the [Web Based Training](#) modules: (LHSC or St Joe's home page / Staff Services / EPR Online Computer Software Training / Electronic Ordering of Blood Transfusion)
2. The request for the blood product to be transported to the patient care area is also entered in Cerner. This is referred to as a "PickUp Order" and should ONLY be entered when ready to transfuse the blood product.
3. A new PickUp order is required each time a blood product is issued to document the release of the product from the BTL. EXAMPLE: Order for 2 PRBC each over 2 hours requires the initial electronic order for 2 PRBC and a PickUp order when ready to start the 1st PRBC and a 2nd PickUp order when ready to start the 2nd PRBC.
4. There are 3 possible PickUp orders that can be placed in Cerner
 - a. PickUp by Ward Staff: This order is placed if someone from the patient care area will be coming to pick up the blood product. The BTL will issue the blood product entered in the PickUp order to the ward staff when they provide the name of the patient.
 - b. PickUp by Porter: This order is placed when the porter is being used to deliver the blood product. When this order is received in the BTL, the BTL technologist will call Portering to dispatch a porter to the BTL to deliver the product to patient care area indicated on the electronic PickUp order. By placing this order in Cerner, the patient care area does not need to call a porter.
 - c. PickUp by Pneumatic Tube: This order is placed ONLY from the VH areas where the pneumatic tube has been approved and validated for the transport of blood products (LRCP, C7 and B6-1). If other patient care areas select this option, a porter will be called instead.

NOTE: Non-UH / VH hospitals have only 1 option for PickUp because all blood products are sent by taxi to these areas. SEE [Section N](#).

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5. Persons picking up the blood products must be an LHSC/SJHC staff member and must have appropriate staff ID.
6. If a volunteer from an outpatient area picks up blood products, s/he must be trained in the process, and also carry appropriate ID.
7. Prior to the release of the blood product from the BTL, the BTL technologist will confirm from the PickUp order what blood product is requested, match the patient name and PIN on the PickUp order to the labels on the blood product, confirm ABO / Rh compatibility, and ensure that the unit or lot number on the blood product matches the number on the label. A visual check of the blood product and expiry date will also be performed in the BTL.

2. Computer Downtime procedure

1. Blood products will be issued by the BTL staff upon presentation of the green ISSUE VOUCHER FOR BLOOD PRODUCTS.
2. The ISSUE VOUCHER FOR BLOOD PRODUCTS
 - a. Must be brought to BTL by the person picking up the product or may be sent to the BTL via the pneumatic tube system, if available.
NOTE: The person picking up the blood product must be able to state the patient's full name and PIN to match the issue voucher that had been sent by pneumatic tube
 - b. Is required at each issue to document release of the blood product from the BTL.
3. The ISSUE VOUCHER FOR BLOOD PRODUCTS, must clearly (addressograph or legible handwriting is acceptable) indicate:
 - a. Patient's full name
 - b. PIN
 - c. Type of product(s) requested
 - d. Date and time product required
 - e. Patient location

IV. Receipt of Blood Products

1. The person who transports the blood product(s) **MUST** hand off the product to a person from the specific Patient Care Area. There must be an acknowledgement that the product has been received.
2. It is the responsibility of the person from the specific Patient Care Area that has accepted the blood product, to immediately notify the patient's nurse that the product has arrived in the Patient Care Area.

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V. Transporting Blood Products via the Pneumatic Tube System

- Transport of blood products via pneumatic tube is limited to a couple of areas at VH.
- A pneumatic tube carrier can only hold one blood product and only PRBC and platelets are transported using the pneumatic tube
- If the pneumatic tube system is not functioning or is backed up with orders, a porter will be called by the BTL to deliver to the patient care area

Receipt of blood product at pneumatic tube station

1. Nurse or designate will go to the tube station to pick up blood product. When pneumatic tube carrier arrives, look for any leaks. If there is any evidence of leakage, refer to the pneumatic tube spill procedure
2. Blood product will be packaged in a one-time use, STAT biohazard bag. This is placed within a re-usable, large Translogic Zip and Fold transport pouch. If no evidence of leakage or spill, remove the product from the pneumatic tube carrier and the Translogic Zip and Fold transport pouch. **Do not remove** the product from the STAT biohazard bag.
3. Check the patient's name and PIN on the Pneumatic Tube Blood Product Transport form, against the patient information on the product label attached to the blood product. (this will be visible through the bag). If there is any discrepancy, contact the BTL.
4. Document the time received and your name on the Pneumatic Tube Blood Product Transport form.
5. Place form in the Translogic Zip and Fold transport pouch, put pouch in pneumatic tube carrier and send back to the BTL. If unable to send by tube, pouch and form must be physically returned to BTL. **The BTL will call if the form has not been returned within 30 minutes of dispense from the BTL.**
6. Transport the blood product in the STAT biohazard bag to the patient's bedside or hand-off to nurse looking after patient.
7. Remove product from the STAT biohazard bag. Dispose of the biohazard bag.
8. [Confirm patient and blood product information](#) at the bedside

Do NOT return any blood products, including empty or partially used units, via the pneumatic tube. Blood products transported by pneumatic tube must be placed in the specific Translogic Zip and Fold transport pouch to contain leakage and prevent contamination of the pneumatic tube system.

VI. Use of Transport Igloo for Operating Room (OR)

1. If more than 1 PRBC is being issued to the OR, an igloo will be used unless specific instructions are received that an igloo is not required. Only packed red cell units are placed in a transport igloo.
 - NOTE: thawed plasma and platelets should be "on hand" for the patient, and remain in the BTL until transfusion is required. These products are then issued to the OR and transfused immediately. They should not be placed in a transport igloo.
2. The transport igloo will be labeled with the patient's name, PIN and the time igloo **must** be returned to the BTL
3. Packed red cell units must remain in the closed transport igloo until ready to transfuse

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4. The transport igloo must be returned **before the time indicated**:
 - a. when the last unit is used, or
 - b. upon completion of the surgical procedure

The transport igloo should **not** accompany the patient from the OR to the patient's post-surgical location.

VII. Documentation

1. Blood Product Labels

The following information will appear on the label on the blood product:

- a. Patient's name and PIN
- b. DOB
- c. Type of blood product
- d. Patient blood type
- e. Product blood type (if applicable)
- f. Unique product number
- g. Section for signature of person who started the transfusion, and 2nd person who checked the information
- h. Section for date/time infusion was started
- i. Special requirements, e.g. anti CMV negative, Irradiated

In addition to the above, the chart label will have the dispense date and time and the patient location.

After labels are checked, dated and signed, they are placed on a generic laboratory report sheet, or other suitable sheet, addressographed with the patient's information.

This sheet(s) is then placed in the lab report section of the patient's chart.

2. Blood Transfusion Report

Test results are posted in PowerChart upon completion

In PowerChart, the Blood Transfusion results follow the other laboratory sections as part of the full Laboratory Report. The following information will be part of this report:

- a. Collection date and time of specimen
- b. Patient's name
- c. PIN number
- d. Patient's date of birth
- e. Patient's location
- f. Physician's name
- g. All Blood Transfusion Laboratory's completed test results. If a Group and Reserve or Crossmatch was ordered, this would include:
 - i. Patient's ABO and Rh group
 - ii. Antibody screen result
 - iii. Specimen expiry date

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The BTL report is **NOT** required in the checking process of any blood products. ALL information required for the checking process is on the blood product labels. SEE Section VIII below:

VIII. Confirming Patient and Blood Product Information

1. The physician or nurse who starts the transfusion, must check ALL blood products, together with a second person, who must also be a regulated health care practitioner with training in the administration of blood products. (The 2nd person confirming patient and blood product information could be a student nurse provided they have demonstrated the knowledge and skill to do so.)
 - **EXCEPTION:** Albumin and Immune Globulin preparations must be checked by the RN or physician who starts the infusion. Checking with a second regulated health care practitioner is NOT required.

2. The check must be done at the patient's side.
 - **NOTE:** The #1 risk of transfusion: is transfusing the wrong blood to the wrong patient. Therefore 2 persons MUST check the identification of the patient. This can only be done in the presence of the patient.

3. The following must be checked:
 - a. Physician's orders including blood component type and dose
 - b. Patient PIN and Name on:
 - ✓ Admission/Discharge Sheet (FaceSheet) or Physician Order Sheet
 - ✓ Label attached to unit of blood
 - ✓ Separate chart label
 - ✓ Patient's armband

These MUST be identical. (If the patient is conscious, s/he should also participate by stating name and DOB)
 - c. Blood Group and Rh of both the patient and the unit on the:
 - ✓ Label attached to unit of blood
 - ✓ Separate chart label and
 - ✓ Canadian Blood Services (CBS) Blood Product label

If NOT identical, refer to ABO compatibility table. Any unresolved discrepancies must be brought to the attention of the BTL staff. (Exception: Fractionated or manufactured products such as albumin and IVIG do not have blood groups)
 - d. Unit/Lot number on:
 - ✓ Label attached to unit of blood
 - ✓ Additional chart label and
 - ✓ CBS Blood Product label

These MUST be identical, with the exception of a pooled product (cryoprecipitate). If the product is pooled, it will be given a unique identifier, which will appear on the BTL labels, but will not be the same number as on the CBS label on the bag.

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NOTE:

1. Albumin and immune globulins should be transfused only to the patient for whom the product was issued.
2. These products are tracked by lot number to a specific patient.
3. The product **MUST** be returned to the BTL to properly update the patient transfusion history, if the designated patient does not receive it.

IX. Special Circumstances

1. Transfusions in the Operating Room

- a. Patient identification is completed including checking the patient's armband against the addressograph card and/or admission/discharge (face) sheet before the patient is admitted to the surgical suite.
- b. Before transfusing blood products, the checks listed above must be completed but the check against the armband is substituted by a check against the addressograph card and/or the admission/discharge (face) sheet.

2. Transfusions in an Outpatient Area

- a. There must be a method in place to ensure unequivocal identification of the patient
- b. Patient must participate in the checking of the blood product by stating and spelling his/her name and stating date of birth. This information must be confirmed against documentation in the patient's chart.
- c. If possible, patient should also check the label of the blood product before infusion to confirm it is his/her name on the label.

3. Autologous Donor/Patient

- a. All of the same checks listed above must be completed when transfusing autologous blood products
- b. In addition, the autologous donor has signed a green card that is attached to their unit of blood that includes his/her name and DOB. If appropriate, the patient should be shown this card as part of the checking process, to confirm that this is his/her unit of blood.
- c. If the name on this green card is different than the name the patient is registered under (Bob instead of Robert, for example), the donor will be requested to verify the identity of the donated blood products by confirming his/her signature.
 - ✓ If the discrepancy is discovered at time of donation, the Canadian Blood Services will document this.
 - ✓ If the discrepancy is not resolved prior to the patient's admission, the BTL will notify the pre-operative area. The patient must confirm his/her signature prior to proceeding to the OR using the forms provided by the BTL.

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X. Visual Inspection of Blood Products

1. Inspect product for abnormal appearance such as unusual color, clots or turbidity.
2. Inspect to ensure the port is intact, and/or seal is on vials or bottles.
3. Any problems with the product should be reported to the BTL immediately.

XI. Documentation of Checking Process

1. When the checks are complete, the person hanging the blood product and the 2nd person verifying the checks, must sign the label that will be attached to the chart. For those products where only one person is required to complete the checking process, only this person needs to sign the label.
2. Record both the date and time transfusion is started on the label.

NOTE: see Visual Aid on next page.

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Initial Poster:
July 2005

Revised June 2009

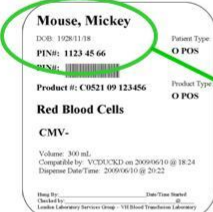
Blood Product Checks

*****MUST*** be done at Patient's Side by 2 Staff Members¹**

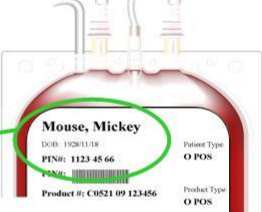
It is NOT necessary to check in PowerChart. All required information is on the label

1 Patient name & PIN (4 checks)


Chart label



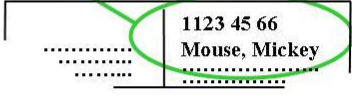
Label on back of Blood Product



Armband

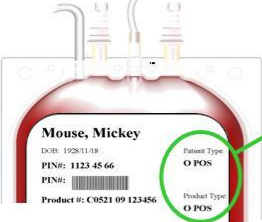


Physician's Order &/or Facesheet (Admission/Discharge Sheet)




2 Blood Group (3 checks)

Label on back of Blood Product




Compare patient group to product group. Must be identical or ABO compatible.

Chart label



Canadian Blood Services (CBS) Product Label



3 Donor Unit Number (3 checks)

Label on back of Blood Product

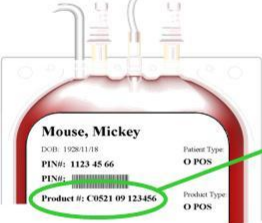




Chart label



Canadian Blood Services (CBS) Product Label



- Chart label**
- ✓ Record Date & Time infusion is started
 - ✓ Signatures of staff¹ who completed checks
 - ✓ Affix label in Lab section of chart

¹Regulated Healthcare Practitioners

- Progress Notes**
- ✓ Record Date and Time the infusion was completed
 - ✓ Vital signs
 - ✓ Any adverse symptoms

More information online @ <http://www.lhsc.on.ca/lab/blbanks/btm.htm>

- Adverse Symptoms?**
- Notify
Attending Physician
and
Blood Transfusion Lab