TRANSFUSION MEDICINE PROTOCOLS

Blood Products: Issue Transportation and Storage

This document should be read in conjunction with the Disclaimer

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Aim

Describe the processes and responsibilities relating to the issue, transportation and storage of Blood Products. Correct handling of blood products, including documentation and audit of storage and transportation conditions and timings is essential to ensure blood products are safe from the risk of bacterial contamination. Where blood products are transported or receipted from another site it is essential that TMU are consulted to ensure products are safe for use.

Collection of Blood Products from Transfusion Medicine Unit (TMU)

TMU provides a 24 hour service. A shift shift scientist is on duty overnight and weekends. All urgent blood products must be collected directly from Blood Bank. This includes all products for Theatres.

- Daytime TMU Blood Bank Extension 82748
- TMU Shift Scientist Telephone 82748/ 82751 or pager 3254

Any member of the nursing or orderly staff may collect blood products directly from the Blood Bank. It is essential that the collector brings the following information:-

- Patient first name and surname and UMRN/ D.O.B e.g. a patient label
- Patient Ward/Clinical area
- Product type and quantity required.

The collector should bring a non-refrigerated Esky for transport at room temperature or if necessary, an Esky will be provided from TMU. Ice bricks must NOT be used.

Only single units may be issued at at a time unless extremely rapid transfusion of large quantities of blood is required e.g. rapid infusion in theatres. This number may be increased when red cell units are being transferred to a monitored satellite blood fridge e.g. Theatre satellite blood fridge. The scientist will label the Esky with the requesting location and the dispatch date and time.

An additional Information sheet is available for Patient Support Services: Operational Instruction on Collection and Transportation of Blood Products

Issue via the Vacuum Transport System

Only plasma derived blood products with a volume of less than 10mL will be issued to KEMH Clinical areas using the KEMH vacuum transport system. Following a telephone request from a clinician staff member, plasma derived products may be issued via the system on the understanding that a staff member will wait at the receiving station until its arrival. This request is documented in the telephone log.

The scientist will label each unit with the requesting location and the issue date and time. Immediately upon receipt, the staff member must take the product directly to the bedside.

Infusion should be commenced within 30 minutes of issue. The Blood Bank must be informed of any delay.

Storage of Blood outside the TMU

- Blood MUST be stored in a designated monitored satellite blood fridge only.
- Blood MUST NEVER be stored in a ward or domestic refrigerator.

Blood stocks are held in the monitored controlled fridges in the Blood Bank. Aside from these fridges the only other approved storage is the Theatre satellite blood fridge located in KEMH Theatre Recovery Room

A blood fridge register is located on the satellite blood fridge. All blood placed in the satellite blood fridge MUST be logged on the fridge register. All blood removed from the satellite blood fridge MUST be logged on the fridge register. The fridge register must be used to log blood in or out of the satellite fridge. All details must be given, including the date and time and name of the staff member. Blood should not be stored overnight in the theatre blood fridge. Post-operative blood should be returned to KEMH Blood Bank.

FFP, Platelets and Cryoprecipitate are issued for immediate transfusion and must NOT be placed in a blood fridge. If infusion is delayed contact the Blood Bank immediately.

The transport history of every unit must be fully documented. If the storage history is unknown contact the Blood Bank immediately as the blood may have to be discarded as it may not be safe for use. Any discarded blood products are documented and reviewed by the Hospital Transfusion Committee

Receiving Blood with a Patient Transfer

Occasionally, blood and blood products arrive with a patient transferred from another hospital. In a life-threatening emergency, these products may be used for the immediate management of that patient until the safety of the transferred blood is assessed by Blood Bank.

IMMEDIATE ACTIONS

Contact the Blood Bank Scientist to advise them of the arrival of the blood. Provide the following information:

- Patient Name and UMRN
- Receiving Location
- Number of Units
- Packing conditions (e.g. ARCBS box, number of cool packs etc.)
- Arrival time
- Sender's location

The Blood Bank scientist will assess the transport conditions of the blood and provide appropriate advice. It is important to send a Group and Hold and/or crossmatch request immediately. This ensures the rapid provision of further blood should it be necessary.

WARNING: Blood that has not been transported correctly in approved licensed ARCBS blood boxes has an increased risk of haemolysis and bacterial proliferation and is dangerous to use.

References

- Australian & New Zealand Society of Blood Transfusion (ANZSBT) & Royal College of Nursing Australia (RCNA) Guidelines for the Administration of Blood Products 2nd Edition, December 2011 http://www.anzsbt.org.au/publications/index.cfm#societyg
- ANZSBT Guidelines for Pretransfusion Testing, 4th Edition, ANZSBT, 2007 http://www.anzsbt.org.au/publications/index.cfm#societyg
- British Committee for Standards in Haematology, Blood Transfusion Task Force. The Administration of blood and blood components and the management of transfused patients. Transfusion Medicine; 1999. 9: 227-238.
- The Australian Blood Service (ARCBS) Blood Component Information
- ANZSBT Guidelines for Pretransfusion Testing, 4th Edition, ANZSBT, 2007 http://www.anzsbt.org.au/publications/index.cfm#societyg
- PathWest Policies and Guidelines and PathLines Test Directory
- National Safety and Quality Health Service Standards, October 2012. Standard 7:

Blood and Blood Products

Related WNHS policies, procedures and guidelines

- WNHS Blood Product Prescription Consent and Refusal
- WNHS Checking Procedure Pre Administration of Blood Products
- Obstetrics and Gynaecology Clinical Guidelines
- Neonatology Clinical Care Guidelines

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