Document Blood Administration

Step By Step Instructions

1. In Doc Flowsheets, add the Blood Administration flowsheet if it is not already present.
2. Complete the Pre-Transfusion Documentation so you know the patient is ready for blood.
3. Click the blue Transfuse Orders link in the upper left corner of the flowsheet table of contents.
4. The Transfuse Orders window opens. To review order details, click on the links to view more information about the transfusion. Click the blue link (A) Prepare Red Blood Cells- to see full order with details or (B) Transfuse RBC- for Transfuse details.
5. Click the Release link in the Transfuse Orders section. This “releases” the blood from lab, telling lab to get the blood ready. A request form prints with your electronic signature and a space to fill in the tube station where blood needs to be sent. The count beside Release will count down with each unit released: do NOT keep pushing this button. It is printing even though you can’t see the “print function”. (Note: If you accidentally release both units, call the lab and tell them you only need one at this time.) If the printer jams, you can click on B (transfuse RBC link) and at the bottom is a link to reprint the requisition to send to lab.

6. Close the Transfuse Order window. A new group appears in the flowsheet with the product name, rate, volume, and line rows. Select the Rate cell and click the syringe button. The Administration window opens. Follow the illustration below. Scanning blood does not work like meds- it will NOT warn you that you have the wrong patient. Scanning only puts the code into the unit number field accurately. Once the patients wrist band is scanned, scan the Donor Number (1): it will have letters and total of 8-9 digits. Scan the Registration Code second (2): has location of blood bank. The Link Line box opens, link the IV with the blood, click Accept. The MAR window will open. Now scan the Product Code number (3) listed by product info: it is a 5 digit number. If barcode is bad DO NOT DELAY BLOOD- MANUALLY enter unit number by typing in the donor number (1) and the product code (3) separated by a hyphen.

7. With a second nurse present, click the Blood Policy link under References: and dual verify according to the criteria listed in the policy. Compare the information on the blood label with the information found on the sticker on back of bag for accuracy. Document vitals if they aren’t already done. Reenter the COMPLETE Unit Number with both Donor Number and Product Code separated by a hyphen. Enter the product name and mark whether unit was divided.

8. Enter the rate of infusion. If you cannot remember if the doctor specified the rate, click the order link in the upper left to view the transfuse details.
9. Fill in the **Issue Date and Time** from a yellow sticker on the product.
10. Then you will document **Start Date/Time** of transfusion.
11. Enter the **charge** for $Blood Administration (ONLY ONCE PER UNIT) by marking “yes”.
12. Note the location of documentation in the **VS/Assessment Documentation** row. Mark any supplies used, like filters and blood warmer.
13. **Mark Yes** to **Start Assessment Checks on Worklist**. This puts tasks on the **Work List** to remind you to assess the patient at 15 min and then every 30 min. We made tasks for a 4 hour infusion plus 1 hour post infusion. When blood has infused, remove extra tasks by clicking **Skip**, making sure to leave the 1 hour post infusion time in place as this is the most often MISSED piece of charting. **Change** the time on this worklist item to accurately represent when this is documented.
14. By entering No adverse reaction on worklist items, you are making all the little check marks you used to make. If any symptoms are present prior to blood administration, mark them in that row. This is best accomplished by charting from the worklist (see above) as it will default in the correct time fields for you.
15. At end of the 15 min observation, **chart a set of vitals**. This may be done in VS section or by choosing Rate, rate verify, and chart vitals from Mar group.
16. **Reaction** - If you document Yes, another flowsheet group opens for additional documentation. Reaction Interventions lists the steps to take and explains them in the ROW INFORMATION BOX. Enter transfusion reaction and Transfusion Reaction Urine orders. If lab deems it a true reaction, you will need to call the doctor and enter the “GEN Adult Blood Transfusion Reaction” Order Set.
17. When the unit has infused, add a column. Clicking on the **syringe icon** again (located in the rate row), choose “stopped” in the action row, and click accept. The Administration window opens. Enter final/end vitals and put 0 in rate box. Document **end date and time, if entire unit transfused, and warmer temp** if applicable. The status is now Stopped. Close MAR and enter volume infused.
18. “Complete” the transfusion group once the 0 and volume are entered—**right click** on the group in **Doc Flowsheets**.

**You Can Also...**

- For emergent transfusions or massive transfusions in the ER/ICU/OR/FBC, you will need to call the lab for blood cooler. On Emergent transfusions on patients with T&S, paper TAR will come with units.
- Blood bank will prepare frozen products when the unit is released in the system.
- For a patient going from OR to recovery: blood products will be documented on paper.