

**SELF-EVALUATION:**  
 1=Independent  
 2= Need assist

**VALIDATOR EVALUATION:**  
 1= Independent W/O Errors  
 2= Independent w/ Minor Errors  
 3= Verbal Prompts w/ Errors

Name: \_\_\_\_\_ ID: \_\_\_\_\_ Department: \_\_\_\_\_

**Competency:** Staff will safely administer blood products, appropriately recognize and intervene for adverse reactions and document transfusion completely and accurately.

Skill/Steps	Rationale	Self		Validator		
		1	2	1	2	3
<p><b>Completes confirmations prior to requesting product from Blood Bank</b></p> <ol style="list-style-type: none"> <li>Physician order:                             <ul style="list-style-type: none"> <li>Date, &amp; time to be transfused</li> <li>Product type, volume, and rate appropriate for patient</li> </ul> </li> <li>Active Informed Consent</li> <li>Pt. has patent IV appropriate for blood transfusion</li> </ol>	<ol style="list-style-type: none"> <li>Single consent covers all transfusions in course of treatment. Obtain new consent for significant change in patient's status: new service, hospitalization, or diagnosis</li> <li>IV gauge is not an issue if pressure is not required to transfuse product within time limits</li> </ol>	<p><b>Comments:</b></p>				
<p><b>Prepares for transfusion</b></p> <ol style="list-style-type: none"> <li>Educates patient and family on anticipated responses and symptoms to report</li> <li>Primes blood tubing/inline filter w/ 0.9%NS</li> <li>Administers pre-medications per orders</li> <li>Aseptically connects blood tubing directly and thoroughly clears IV with isotonic solution</li> <li>Measures and records baseline VS. (BP, pulse, resp., and temp) within 30 minutes of start of transfusion</li> <li>Double checks product received matches product ordered</li> <li>Maintains refrigeration requirements as specified for product</li> </ol>	<ol style="list-style-type: none"> <li>All blood must be filtered to prevent infusion of clots. Leukocyte reduction filter are rarely needed because of pre-filtering techniques for WBCs</li> <li>Medications or incompatible IV solutions may cause lysis or clotting</li> <li>RBCs, Plasma in blood refrigerators only, Platelets at room temp</li> </ol>	<p><b>Comments:</b></p>				
<p><b>Performs bedside verifications immediately prior to transfusion (w/ qualified, secondary staff member)</b></p> <ol style="list-style-type: none"> <li>Asks patient to state name and birthdate</li> <li>Uses blood bag labels, Transfusion Record Form, and Two Positive Identifiers <b>attached to patient:</b> <ul style="list-style-type: none"> <li>Complete name/CPI w/ blood product</li> <li>Donor/unit number</li> <li>Component type</li> <li>ABO/Rh type compatibility</li> <li>Product within outdate limit</li> </ul> </li> <li>Both staff sign Transfusion Form</li> </ol>	<p>2. Completes safety "chain" of cross match process</p> <p>NEVER BYPASSED</p> <p>See <a href="#">ABO-Rh Compatibility Table</a> in Blood Bank Manual</p>	<p><b>Comments:</b></p>				
<p><b>Administers blood component</b></p>		Self		Validator		

		Self		Validator		
		1	2	1	2	3
<b>Administers blood component</b>						
<ol style="list-style-type: none"> <li>Gently mixes product by inverting</li> <li>Records start time and date on Transfusion Form and signs                             <ul style="list-style-type: none"> <li>Documents above plus component and unit number in medical record per unit/dept. policy</li> </ul> </li> <li>Follows manufacturer's instructions for additional filters, pressure infusers, and blood warmers</li> <li>Begins transfusion                             <ul style="list-style-type: none"> <li>Adults: &lt; than 1ml/min for first 15 min.</li> <li>Peds -proportionately smaller</li> </ul> </li> <li>Stays with patient during first 15 min.</li> </ol>				<b>Comments:</b>  		
<b>Monitors patient during transfusion</b>						
<ol style="list-style-type: none"> <li>Vital Signs and skin assessment:                             <ul style="list-style-type: none"> <li>15 and 30 minutes after start of transfusion</li> <li>Every 60 minutes during and 1 hour after (or as ordered/necessitated by patient condition)</li> </ul> </li> <li>Assesses for signs and symptoms of <b>adverse reaction*</b></li> <li>Documents on Transfusion Record, flow sheet, or medical record</li> <li>For stable patient, maintains infusion rate per Blood Bank guidelines:                             <ul style="list-style-type: none"> <li>RBCs 4ml/min after first 15 min. 1 unit over 2-4hrs</li> <li>Peds: 10-20ml/kg over 30-60min.</li> </ul> <p>Platelets, plasma and cryoprecipitate 10ml/min. 1 unit over 30min total</p> </li> </ol>		<ol style="list-style-type: none"> <li>Recognition of adverse reaction</li> </ol>		<b>Comments:</b>  		
				<ol style="list-style-type: none"> <li>Avoidance of rapid intravascular expansion.</li> <li>RBCs at room temp for &gt;4hrs have increased risk of bacterial contamination</li> </ol>		
<b>Completes uncomplicated transfusion</b>						
<ol style="list-style-type: none"> <li>Flushes line completely with isotonic solution</li> <li>Replaces tubing with ordered IV solution</li> <li>Discards blood bag and tubing in biohazard container</li> <li>Documentation:                             <ul style="list-style-type: none"> <li>Transfusion Record Form:                                     <ul style="list-style-type: none"> <li>Date &amp; time transfusion stopped</li> <li>Volume infused</li> <li>No Reaction box checked</li> <li>All required signatures included</li> </ul> </li> <li>Medical Record:                                     <ul style="list-style-type: none"> <li>Patient response to transfusion</li> </ul> </li> </ul> </li> </ol>				<b>Comments:</b>  		
<b>Recognizes adverse reaction</b>		0-60 sec		>61 sec		
Acute Hemolytic		0-60 sec		>61 sec		
Febrile		0-60 sec		>61 sec		
Rigors		0-60 sec		>61 sec		
Allergic-Urticaria		0-60 sec		>61 sec		
Allergic-Anaphylactic		0-60 sec		>61 sec		

**Competency: Blood Administration**

**Employee Name** \_\_\_\_\_

**UMID** \_\_\_\_\_

Bacterial Contamination- Sepsis		0-60 sec	>61 sec			
Hypotension		0-60 sec	>61 sec			
Graft versus Host (GVHD)		0-60 sec	>61 sec			
NON-immune Hemolysis		0-60 sec	>61 sec			
Delayed Hemolytic		0-60 sec	>61 sec			
Post-transfusion Purpura (PTP)		0-60 sec	>61 sec			
<b>Provides appropriate intervention</b>	1. Prevent any more cells from being transfused	<b>Self</b>		<b>Validator</b>		
1. Stops transfusion immediately 2. Maintains IV with new solution and tubing 3. Performs emergency actions, including Code Blue, airway maintenance, medication administration... 4. Re-verifies patient ID, blood type, unit number as in Step 3-2 above		1	2	1	2	3
<b>Comments:</b>						
<b>Completes complicated transfusion</b>	Post samples help definitively diagnose reaction and type	<b>Self</b>		<b>Validator</b>		
1. Notifies Blood Bank 2. Transfusion Reaction Form 3. Obtains blood samples as directed 4. Saves tubing and bag for return to Blood Bank 5. Sends sample, bag & tubing to Blood Bank 6. Provides follow-up care as directed		1	2	1	2	3
<b>Comments:</b>						

<b>Employee</b>	<b>Signature</b>	<b>initials</b>	<b>Date</b>
<b>Validator</b>	<b>Signature</b>	<b>Initials</b>	<b>Date</b>
<b>Validator</b>	<b>Signature</b>	<b>Initials</b>	<b>Date</b>

**This employee has satisfactorily completed the above competency**

<b>Validator</b>	<b>Signature</b>	<b>Initials</b>	<b>Date</b>
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**This competency has not been achieved. Action Plan and expected date of completion as follows:**

<b>Validator</b>	<b>Signature</b>	<b>Initials</b>	<b>Date</b>
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**Resources:**

