Train
Documenting Blood Administration

Role(s) affected: Clinicians who administer blood products including inpatient, anesthesia, ED and pre-procedural and post-procedural areas.

When a blood product is ordered and prepared for administration, the Blood Bank electronically matches blood products to the patient. In the Blood Administration flowsheet, you can scan blood accurately and efficiently.

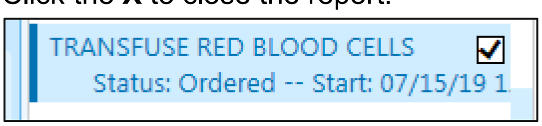
Ordering Blood

Providers and nurses can order blood using the Blood Administration order set(s). For detail instructions for ordering blood, refer to the Ordering Blood tip sheet.

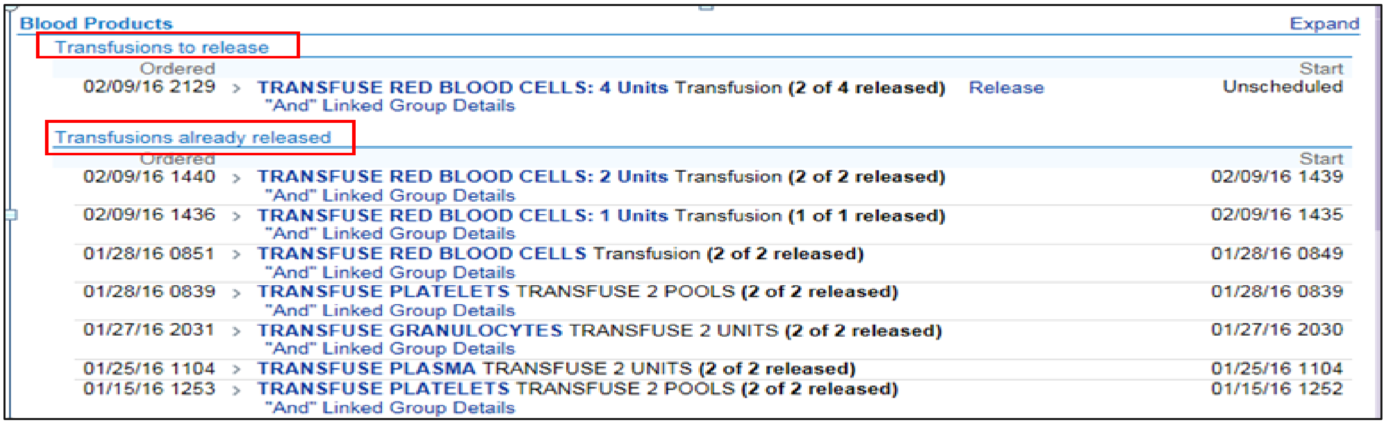
Releasing Transfusion Orders

After a blood transfusion has been ordered, follow these steps to administer the blood product:

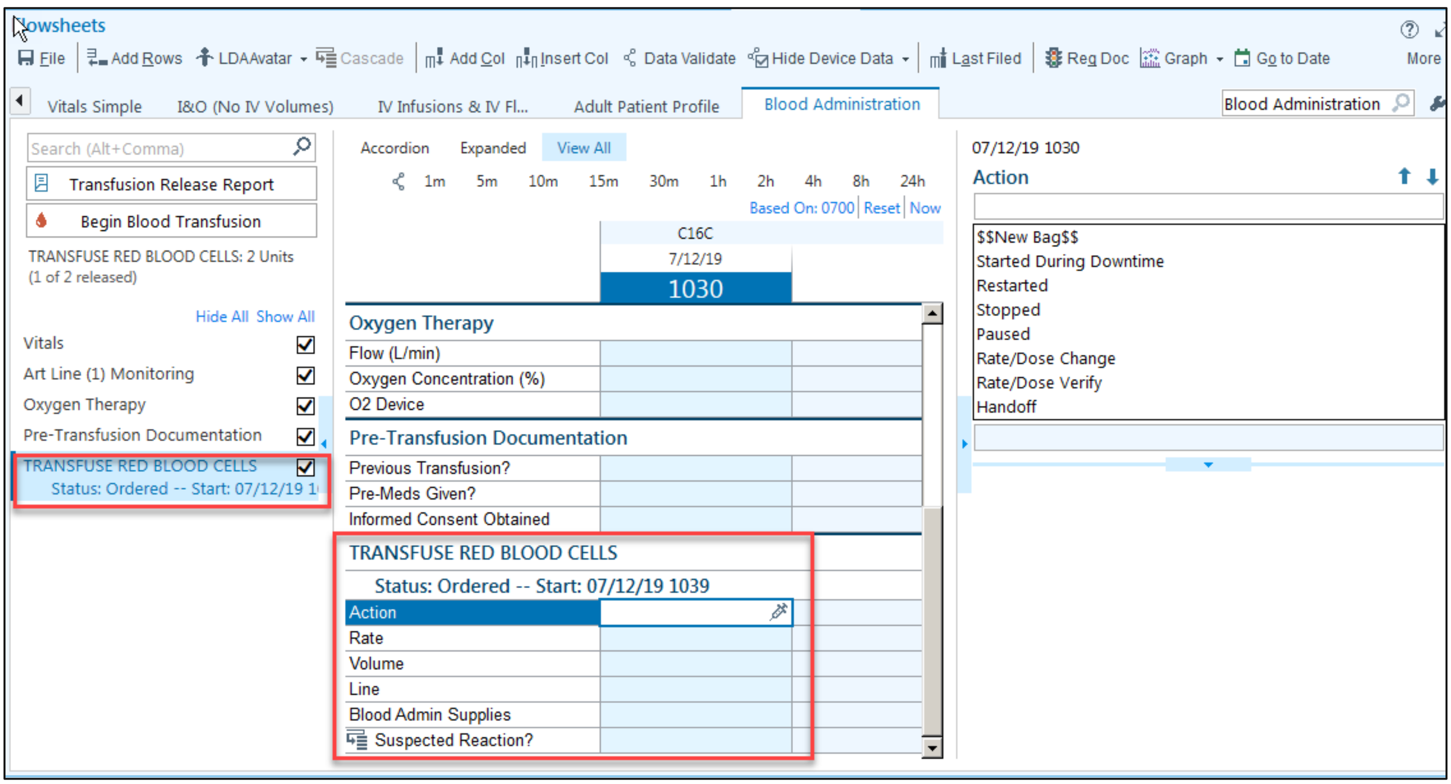
Release the orders in the **Blood Adminstration** flowsheet:
ED: Click on the link to Release Blood under the MAR in the ED Narrator.
Anesthesia: Select the patient on the StatusBoard and click **Intra** on the toolbar. Then, click **Blood** on the activity toolbar.
Inpatient: Click on **Flowsheets** and search for the **Blood Administration** flowsheet.
Click on the blood transfusion report that appears at the top of the Blood Adminstration flowsheet Table of Contents. Click the **Release Transfusion Report** to open the report and click **Release** to release a unit. Click the **X** to close the report.



The documentation group appears in the Blood Administration flowsheet for inpatient or in the ED Narrator. In the Release transfusion report, you are able to see the number of Transfusions ready to release and the number of transfusions already released.



Releasing the unit opens the Transfuse Red Blood Cells documentation rows in the flow sheet.



The Blood Release form prints on the unit. The staff is required to take the blood release form to the Blood Bank to obtain the blood product for the patient.

Handwritten blood requistions are for system downtime use only (includes IHIS downtimes, printer problems or other emergencies).

Reminder: You should release blood products only after you have checked each of the following:

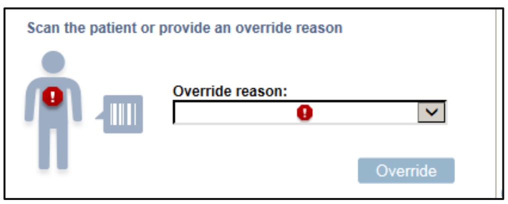
i. Informed Consent
ii. Vital Signs

Documenting the Administration of Blood Product

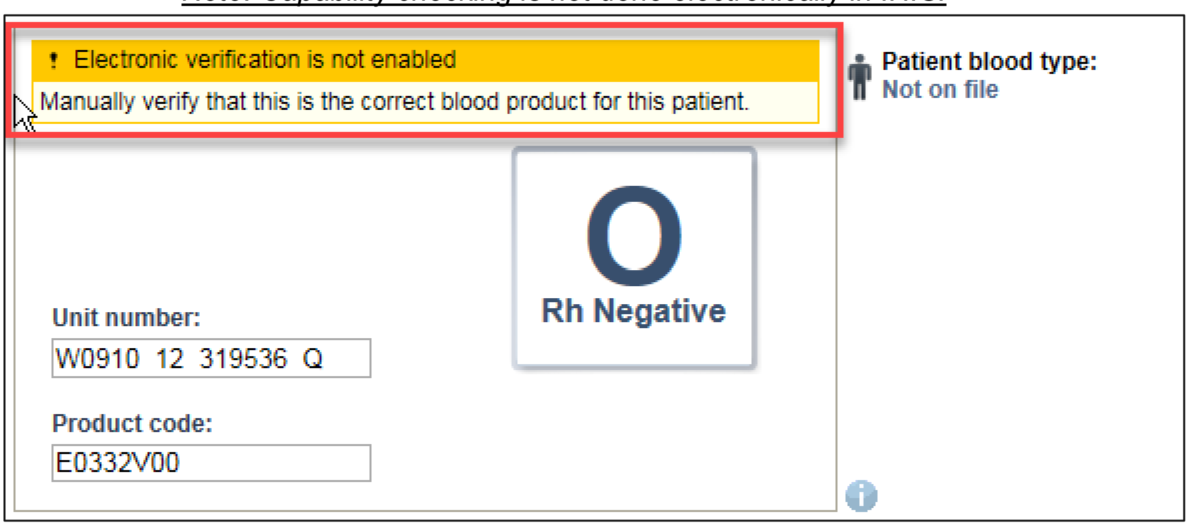
1. Complete the pre-transfusion documentation, which consists of three yes or no questions to indicate whether patient had previous transfusion, pre-medications were given, and that informed consent was obtained.
1. Enter vitals signs if needed. You can link vitals to documentation in the **Blood Administration** form.
2. Click in the **Action** row in the group you released for the specific blood product , select the type of action from the options and press **Enter** to open up the Administration window.

- Clicking on $$Newbag$$ or the appropriate MAR Action to document the blood administration.
- In the ED Narrator, you do not have to click on the syringe. Instead, scanthe product from the Narrator.

3. The **Link Line** prompt appears. Link the line appropriately. Notice that you can see all of the information for the properties row to help you select the correct line.
4. The **Administration** window opens. Scan the patient's **wristband barcode**.



5. Scan the blood bag's **Unit number** and **Product code** (required).
6. Scan the **Unit blood type**. (required)
   - The bag's blood type may be different from patient's blood type. Check the link to OSUWMC policy in the upper left corner of the administration window to open a compatibility chart.
   - *<u>Note: Capability checking is not done electronically in IHIS.</u>*



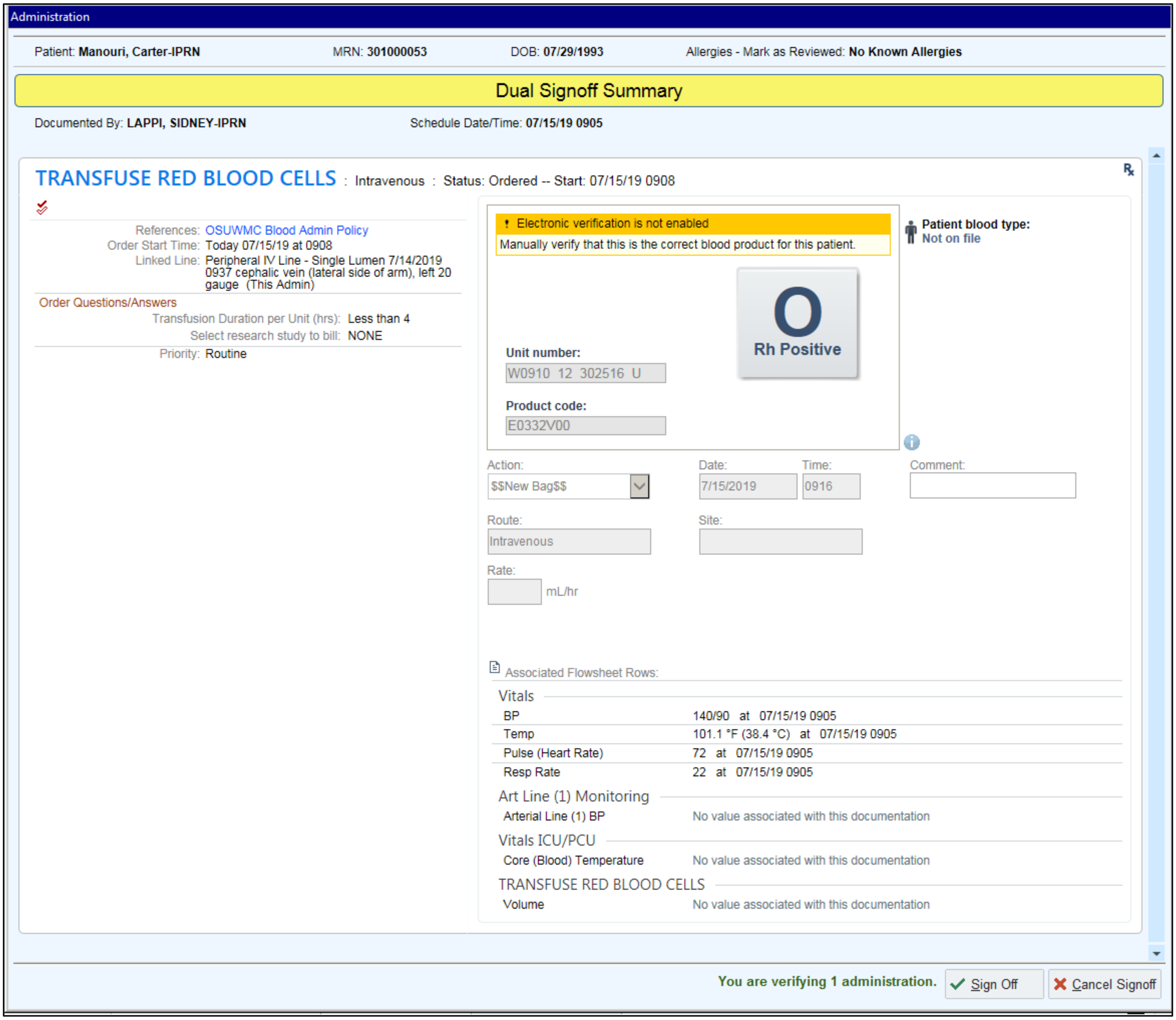
7. Document the **rate of transfusion**.
8. Use the check box to link vitals taken previous to the transfusion (within timeline of policy)
9. Click **Accept** and answer your **Challenge Questions**.

Dual Verification Process Requirement

Dual Verification will now be initiated in IHIS. After you are asked to complete your challenge questions and nurse will be ask to complete Dual Signoff Summary.

10. Double check the blood product with another nurse or Licensed Independent Provider (LIP).

- Second nurse validates Patient name, MRN number and the Unit Number, Produce code and Unit blood type are correct then clicks **Sign Off**
- Second Nurse enters **User ID** and **Password** and completes Challenge questions or “Taps” their badge if using Single Sign on for user authentication.



- **This is the legal document for documenting the double check for blood product administration.**

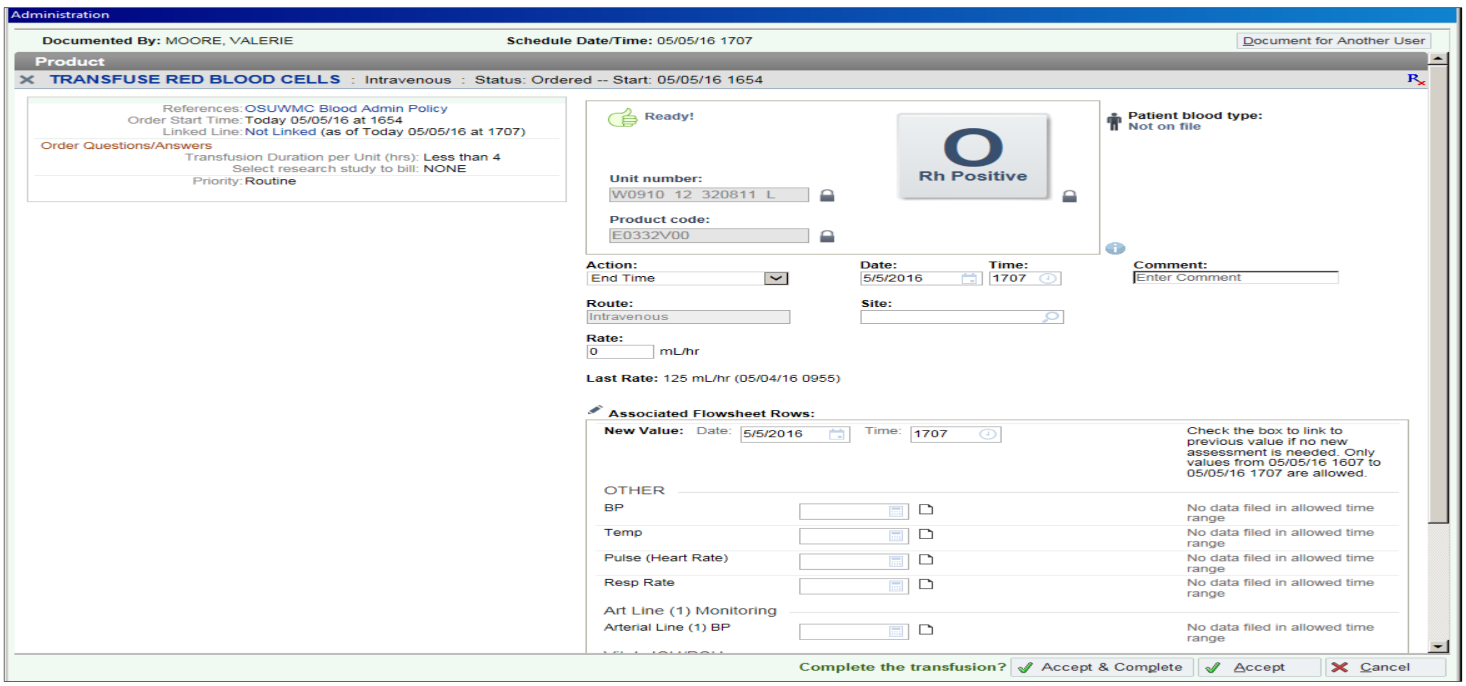
11. Patient's Nurses Document **Blood Administration Supplies** as needed.

12. Follow Blood administration policy for infusion and documentation.

Post-Tranfusion Documentation

When the transfusion is completed, document the total volume of blood product administered and complete the row.

1. On the Blood Administration flowsheet, click **Add New** column.
2. Document the **Time Transfusion Complete** row in the flowsheet.
3. In the **Action** row, select **Stopped** from the dropdown list and click **Accept**.
   - A Rate of Zero is automatically entered in the Administration window.
   - An Action of Stopped opens the Administration window.
   - Complete the transfusion documentation.



   - Other Actions such as **Paused, Handoff** are also available as a selection in the **Action** row.
4. Document the volume of blood product transfused in the flowsheet rows in the Administration window and then immediately complete the infusion group from the window.
   - The **Volume** row is available in every action.
   - You may choose to use the **Suggested Volume** row.

5. If all documentation is finished, you can click **Accept** and **Complete,** and the system automatically completes the row for you. Then you can **Hide Comp'd** the rows that you have completed documentation.
   - If further documentation in the flowsheet is required, click **Accept** so you can continue to complete your documentation then once finished, you should **Complete** the row.
   - Caution: If you select the Accept and Complete button accidentally prior to entering, you can right click to reactivate the completed row, enter a volume and then complete the row after you have documented the volume.

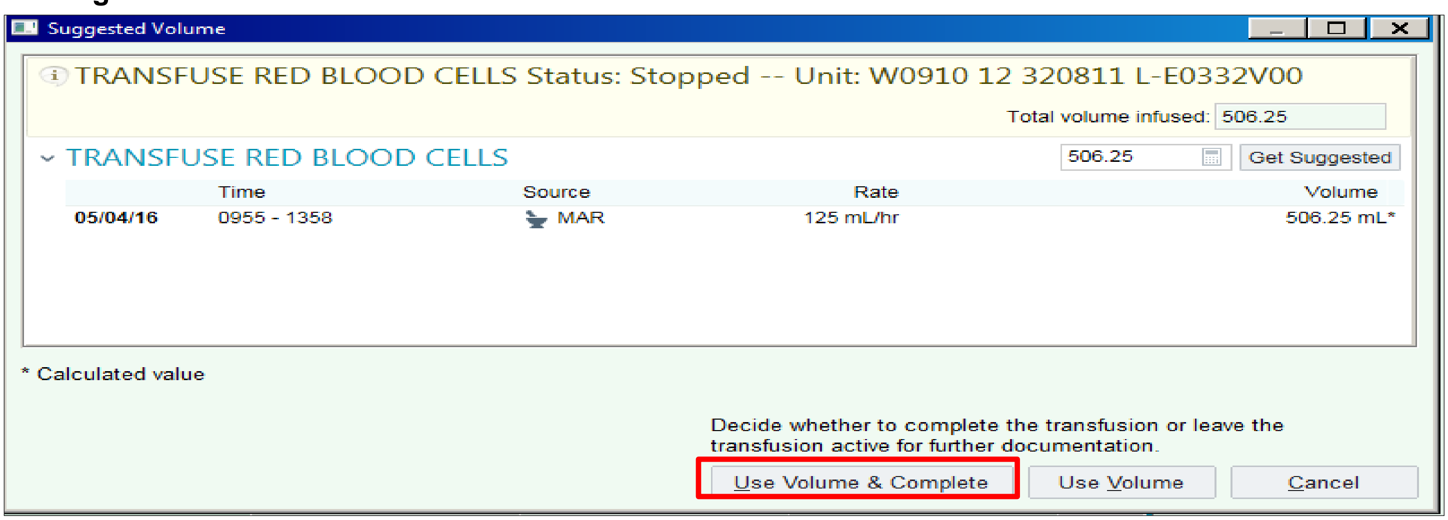
New Warnings and Banners to appear when documentation incomplete

New warnings appear if a clinician needs to complete documentation for blood. The warnings appear in the flowsheet or as a banner in the Release Transfuion report (Blood flowsheet) or Blood Transfusion report (Summary activity). Warnings appear when a transfusion is:

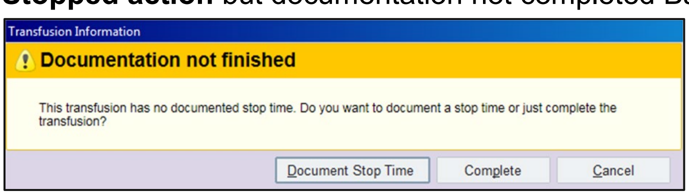
- Running for more than 6 hours
- Missing volumes
- Completed, but no Stopped action
- Stopped action, but not Completed

The warnings are hyperlinks, so the clinician can take action by either entering the volume, stopping the transfusion or completing the group.

Missing Volume window

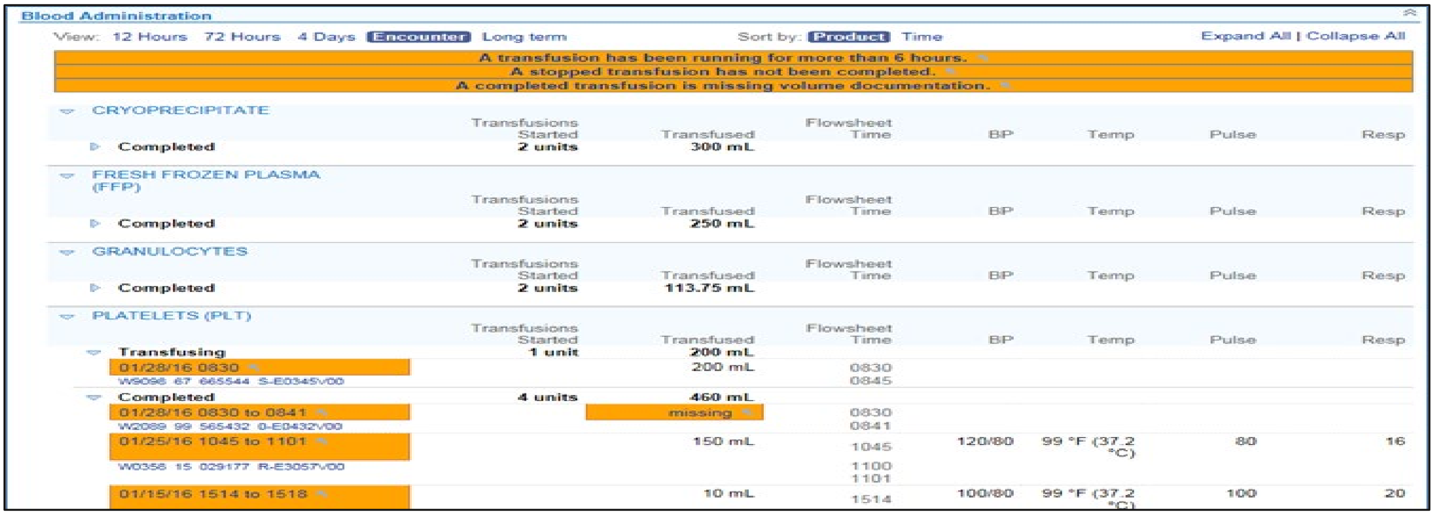


Stopped action but documentation not completed Banner.

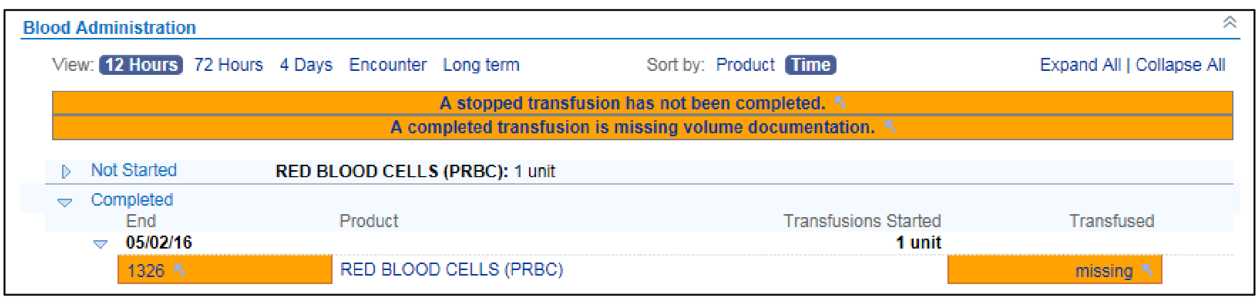


Blood Transfusion History Report and Accordion Report

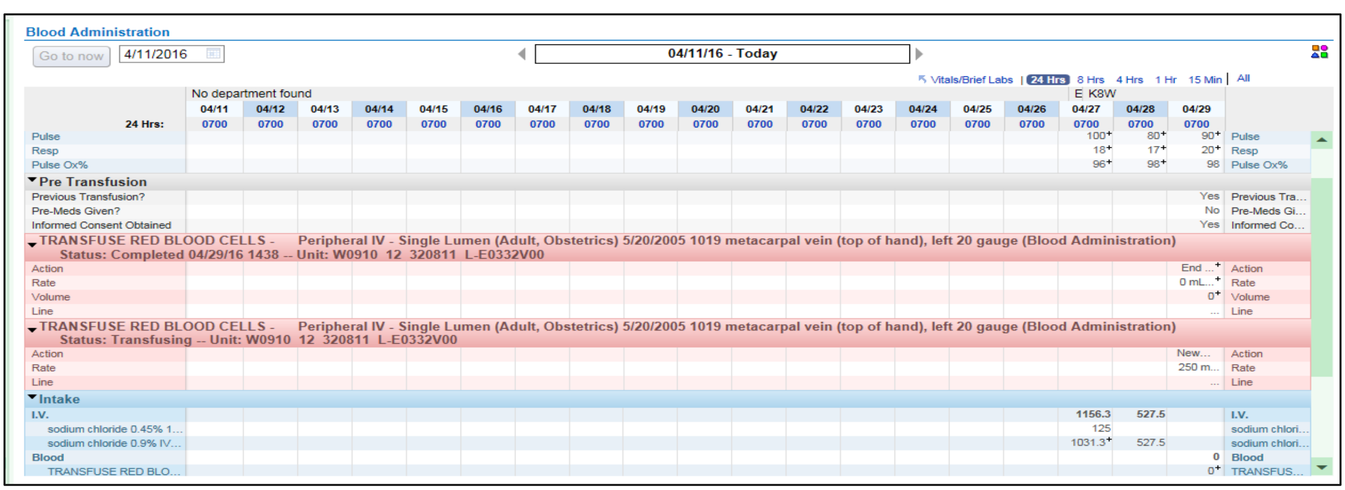
Running more than 6 hours



The Blood Transfusion History report shows the patient's transfusion history. The report can be filtered by various times, including 3 months, 1 year, 5 years and Lifetime. No history of a transfusion is noted as well. The warning banners of incomplete documentation can also be viewed here.



The Blood Administration report includes types of blood product given, number of units of blood given, actions documented and blood product volume infused.



Documenting a Transfusion Reaction

To document a suspected transfusion reaction, complete the following:

1. Open the administration record and select a **Medication Admininstration Record (MAR) Action** of **Stopped**.
    - The system automatically opens the blood administration window when a clinician documents a **Stop** action.
2. Document vitals and volume of blood transfused in the flowsheet rows in the Administration window and then immediately complete the infusion group from the window.
3. Return to the Blood Administration flowsheet and document suspected reaction.