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| **Transfusions at Children’s Special Care Nursery-Mercy Hospital** | | | | | | | | | | |
| **Purpose** | | This process describes how to provide red blood cells for transfusions at Children’s Special Care Nursey at Mercy Hospital. | | | | | | | | |
| **Policy Statements** | | * Children’s Minnesota-Minneapolis transfusion service will provide red blood cells to Children’s Special Care Nursey at Mercy Hospital upon request of a licensed provider. * Blood transfusion will occur Monday through Friday 8am-5pm * Only red blood cells will be transfused at Children’s Special Care Nursery-Mercy Hospital * Red blood cells will be issued in a bag with a minimum of 100 mLs with a 60 mL syringe set. No syringes will be issued. * Patient identification, specimen labeling, pre or post transfusion testing and product issuing must follow Children’s Transfusion Service’s established policies/procedures. * The following transfusion criteria must be meet:   + All RNs who performed transfusions will complete training including the function of red blood cells, transportation and storage requirements, administration procedures, recognition and management of adverse reactions to transfusion.   + RNs who perform transfusion will complete yearly blood transfusion training and required education * Children’s Special Care Nursery-Mercy will maintain COLA accreditation * Children’s Special Care Nursey-Mercy transfusionist will perform transfusion audits on all transfusions | | | | | | | | |
| **Process** | |  | | | | | | | | |
|  | | **Activity** | | | | **Responsible Party** | | **Key Considerations** | | **Related Document** |
|  | | 1 | Initiate transfusion request. | | | Attending provider | | * Inform the parent/guardian of the risk/benefits of transfusion and sign consent * Enter the order into the Cerner | |  |
|  | | 2 | Review order and obtain specimen (if needed) | | | Special Care Nursery RN | | * Review order in Cerner * Verify the patient has a current blood bank work-up, either in Cerner or call Mpls transfusion Service at 612-813-6824 * If no transfusion history, obtain blood specimen for type and screen and deliver to Children’s Minneapolis Laboratory | |  |
|  | | 3 | Process transfusion request | | | Children’s Minneapolis Transfusion Service | | * Follow normal pretransfusion order processes. * Prepare RBC product * Issue products Special Care Nursery-Mercy * Fill out Mercy Transfusion Documentation form and send with product. * When release slip is received have Sendouts call for an 1 hour Priority Courier pick-up * Pack products for transport using the following cooler transport guidelines | | TS 12.11 Transporting of products in Coolers  TSf 3.32.2 Special Care Nursery-Mercy Transfusion Documentation |
|  | | 4 | Obtain and transfuse blood product | | | Special Care Nursey RN | | * Activate release slip in Cerner. * Call Minneapolis transfusion service to verify that the release slip was received 612-813-6824 * When blood product cooler is received.   + Fill out Mercy Transfusion Documentation Form.   + Verify temperature of unit by using the infrared thermometer. Unit temperature needs to be between 1-10°C. If temperature out of range, unit cannot be transfused. Call the Transfusions Service at 612-813-6824 * Leave the blood unit in the cooler until ready for transfusion * Follow Children’s Minnesota Blood Administration policy 366.00 * Fill out Blood Administration Audit Checklist * After transfusion is completed, attach Pink unit tag to the Transfusion Documentation form * Fax both Documentation form and Administration Audit Check list to Minneapolis Transfusion Service 612-813-6951. * Place completed forms in the Blood Administration three ring binder. * Send cooler back to Minneapolis Children’s Transfusion Service the next morning with hospital courier. | | 366.00 blood Product Administration  TSf 3.32.1 Blood Administration Audit |
|  | | 5 | Mercy Special Care Nursery paper work | | | Transfusion service | | * Review paperwork for completion. * If everything is correctly filled out, place in three ring binder. * If there is missing documentation, place paperwork on technical specialist desk and fill out SLR | |  |
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| **Procedure** | |  | | | | | | | | | | |
|  | | **Step** | | | Action | | | | | | | |
| Assessing RBC  temperature using infrared | | 1 | | | Remove unit from cooler and mix the unit well. | | | | | | | |
| thermometer- | | 2 | | | Hold infrared thermometer within 2 inches of the blood product container surface. | | | | | | | |
| Special Care Nursery-Mercy Nursing | | 3 | | | Press and continue to hold down the trigger until the temperature reading displays. | | | | | | | |
|  | | 4 | | | Document the temperature on Special Care Nursery-Mercy Transfusion Documentation form | | | | | | | |
|  | | 5 | | | |  |  | | --- | --- | | **If** | **Then** | | Temperature is acceptable  **Red Blood Cells 1-10°C** | Red Blood cells are okay to be transfused. | | Temperature is unacceptable either below 1°C or above 10°C | Red Blood Cell unit **CANNOT** be transfused. Call the Transfusion Service at 612-813-6824 | | | | | | | | |
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| **Approval**  **Workflow** | | Transfusion Service/Laboratory Medical Director | | | | | | | | |
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| **Historical Record** | | **Version** | | | **Written/Revised by:** | | **Effective Date:** | | **Summary of Revisions** | |
| 1 | | | S. Cassidy | | 03/16/2020 | | Initial Version | |