NTHSSA-WIDE POLICY	
Title: Notification of Transfusion to Patients	Policy Number: 15-26-V1
Applicable Domain: LAB, DI and Pharmacy Services	
Additional Domain(s): Community Health Centre Clinical Services, Hospital Based Clinical Services	
Effective Date: 31/08/2020	Next Review Date: 31/08/2023
Issuing Authority: Director, Health Services	Date Approved: 31/08/2020
Accreditation Canada Applicable Standard: 21.3 Transfusion Services	

GUIDING PRINCIPLE:
The Northwest Territories Health and Social Services (NTHSSA) value patient's rights to receive safe and competent care. This includes ensuring an effective process for all patients requiring blood components and products.

PURPOSE/RATIONALE:
Provide standardization for the process of notification of transfusion of a blood component or blood product to patient(s) for their medical record and knowledge as required per Transfusion Medicine Standards.

DEFINITIONS:

Blood component: a therapeutic part of blood intended for transfusion (e.g. packed red blood cells, platelets, granulocytes, plasma and cryoprecipitate)

Blood product: a therapeutic product derived from human blood or plasma and produced by a manufacturing process (e.g. albumin, immunoglobulins, coagulation products, Winrho/RhIg).

Health care professional (HCP): an individual who is a member of a regulated health discipline and who practices within scope and role.

Substitute Decision Maker (SDM): a person who has legal authority to make healthcare decisions with or on behalf of the patient.

SCOPE/APPLICABILITY:

Compliance with this document is required by all Northwest Territories Health and Social Services Authority (NTHSSA) employees, members of the health care staff, students, and other persons acting on behalf of NTHSSA (including contracted service providers as necessary).

PROCEDURE:

1. **Laboratory Staff**
   - **1.1.** Letters of Notification of Transfusion for patient will be prepared by laboratory staff who will fill out component or product to be transfused section.
   - **1.2.** Letter will be placed with/given with blood component or product when issued for transfusion to patient.

2. **Nursing Staff/Clinical Staff/Midwifery Staff**
   - **2.1.** Letter of Notification is obtained from the laboratory upon issue of the blood component or product to be transfused to patient.
   - **2.2.** Employee administering transfusion to add patient information to letter and date letter at time of transfusion.
   - **2.3.** Letter to be placed on chart into the discharge planning paperwork section until time of patient discharge.
   - **2.4.** Letter to be given to patient (or guardian/SDM) along with other discharge information at time of discharge.
     - **2.4.1.** If patient discharged to another health facility – letter to be forwarded with patient to be distributed to patient upon final discharge.
   - **2.5.** The discharge nurse/midwife will verbally inform patient of receipt of blood components or products during the stay.
   - **2.6.** The discharge nurse/midwife will make a notation on the patients discharge form or in chart notes of stay if no discharge form is required of the patient's receipt of the Notification of Transfusion letter.
   - **2.7.** If unit/product is not transfused and returned to laboratory – letter must also be returned with unit/product to the laboratory to ensure it is not given to patient when patient was not transfused.

PERFORMANCE MEASURES:

100% of NTHSSA HCP who are authorized within their scope of practice to participate in blood component and products transfusion are aware and compliant with this procedure and associated policies. Periodic chart audits will be conducted to measure compliance with this policy.

CROSS-REFERENCES:

1. NTHSSA Wide Policy: Transfusion of Blood Components and Products
2. Program SOP: Administration of Packed Red Blood Cells
3. Program SOP: Administration of Plasma
4. Program SOP: Administration of Platelets
5. Program SOP: Laboratory Procedure TMM42000 Issuing Blood Components for Infusion
6. Program SOP: Laboratory Procedure TMM42100 Issuing Blood Products for Infusion
7. Program SOP: Laboratory Procedure TMM42010 Issuing Blood Components for Infusion Manually
8. Program SOP: Laboratory Procedure TMM42102 Issuing Blood Products for Infusion Manually

ATTACHMENTS:

Appendix A – Notification of transfusion letter to patients

REFERENCES:

Canadian Society of Transfusion Medicine. (April 2017). *Standards for Hospital Transfusion Services, Version 4.*

Canadian Standards Association. (March 2020). *Blood and Blood Components CAN/CSA-Z902:20.*

APPROVAL:

August 31, 2020

_____

Date

_____

Sue Cullen
NTHSSA Chief Executive Officer

NORTHWEST TERRITORIES
Health and Social Services Authority

Patient Name:	Patient/Guardian Name:
Date of Birth:	Address:
Heath Care Number:	
Hospital Number:	

Subject: Notification of Transfusion

Date: _____

Dear Sir or Madam,

As part of the Northwest Territories Health and Social Services Authority's commitment to providing quality and safe health care, all patients are provided with a record of blood and blood products administered. Canadian standards state that all recipients of blood and /or blood products shall be notified in writing of having a transfusion.

During a recent hospital visit/stay, the patient listed above received the following blood components or products:

☐ Red Blood Cells ☐ Platelets ☐ Frozen Plasma ☐ Blood Products

Specify type: _____

This letter is for your information and we suggest that you retain it in your personal medical file.
If you require a detailed list of the blood components or blood products received, please discuss this request with your healthcare provider.

Territorial Medical Director, NTHSSA

Thank you,

NTHSSA, Laboratory Services

Northwest Territories Health and Social Services Authority

Box 1320, Yellowknife, NT X1A 2L9

Administration des services de santé et des services sociaux
DES TERRITOIRES DU NORD-OUEST

Nom du patient :	Parent ou tuteur :
Date de naissance :	Adresse :
N° d'ass.-maladie :	
N° de carte d'hôpital :	

Objet : Notification de transfusion

Date: _____

Madame,
Monsieur,

En vertu de l'engagement de l'Administration des services de santé et des services sociaux des Territoires du Nord-Ouest d'offrir des soins de santé de qualité et sécuritaires, nous fournissons maintenant aux patients un dossier détaillant le sang et les produits sanguins administrés. Les normes canadiennes précisent que tout patient qui reçoit du sang ou des produits sanguins doit être avisé de la transfusion par écrit.

Au cours d'une visite ou d'un séjour récent à l'hôpital, le patient susmentionné s'est vu administrer les composants ou les produits sanguins suivants :

☐ Globules rouges ☐ Plaquettes ☐ Plasma congelé ☐ Produits sanguins

Préciser : _____

La présente lettre vous est envoyée à titre informatif seulement. Nous vous conseillons de la conserver dans votre dossier médical personnel.

Si vous avez besoin d'une liste détaillée des composants ou des produits sanguins qui vous ont été administrés, veuillez communiquer avec votre fournisseur de soins de santé.

Directrice médicale territorial, ASTNO

Merci,

Services de laboratoire de l'ASTNO

Administration des services de santé et des services sociaux des Territoires du Nord-Ouest (ASTNO)
C. P. 1320,
Yellowknife NT X1A 2L9