Go Live: August 27, 2019 Northwell System Blood Component Administration Policy

Includes:

- Policy SLS.702 Blood Component Administration
- Transfusion Administration Record (TAR) #1178
- Blood Warmer Policy Phelps Hospital 11/2018 (Blood Warmer Log & Daily Blood Bank Notification)
- Blood Consent (# 1253 English/Spanish)
- Blood Script Procedure
- Consent for Blood Transfusion Refusal #1439

Education: Unit Posters/Read & Sign/Healthstream Learning 12/2018

Recommended Flow Rates

<u>Adult</u>

	BLOOD COMPONENT	RATE	LOWER LIMIT	UPPER LIMIT	
	Red Blood Cells	100 mls/hour	60 mls/hour	125 mls/hour	
	Plasma (FFP)	600 mls/hour	100 mls/hour	900 mls/hour	
	Platelets	600 mls/hour	50 mls/hour	900 mls/hour	
	Cryoprecipitate	600 mls/hour	100 mls/hour	900 mls/hour	

08/20/2019cy

Phelps Vital Signs

A. Patient Monitoring

Vital signs will be recorded on the Phelps Hospital **Transfusion Administration Monitoring** form (NEPS # 1178). See policy pages 10-11.

1. <u>Pre Transfusion</u> (baseline)

o Within 30 minutes before the start of the transfusion

2. After Start of Transfusion

- o **START** time is defined as the time when the blood enters the patient's vein.
- o Within the first 10-15 minutes after the start of the transfusion
- Within 45 minutes after the start of the transfusion.
- Within 120 minutes after the start of the transfusion.
- Within 180 minutes after the start of the transfusion.

3. End of the Transfusion

• **END** time of transfusion is defined as time when the blood lead **clamp is closed** and the saline bag clamp is opened.

4. Post Transfusion

• Within 30 minutes of completion of the transfusion.

Northwell Recommended Flow Rates

Time Limits and Flow Rates for Transfusion

- PRBCs transfusion will be completed in 4 hours or less from the time the unit is spiked.
- The blood administration tubing should be primed and the transfusion started immediately
 after spiking the unit to prevent delays and possible bacterial contamination.
- It is recommended that all routine adult non-emergent transfusions be started at lower limit of **60 ml/hr**, and under the close observation of clinical personnel. If no evidence of a reaction is noted within the first 15 minutes, flow can be increased to the prescribed rate or transfusion time period according to the provider's order.
- Pediatric volumes being small in nature the rate is started at the ordered volume to be infused

Recommended Flow Rates

Adult

BLOOD COMPONENT	RATE	LOWER LIMIT	UPPER LIMIT
Red Blood Cells	100 mls/hour	60 mls/hour	125 mls/hour
Plasma (FFP)	600 mls/hour	100 mls/hour	900 mls/hour
Platelets	600 mls/hour	50 mls/hour	900 mls/hour
Cryoprecipitate	600 mls/hour	100 mls/hour	900 mls/hour

Neonatal and Pediatric

Suggested Transfusion Rate for Neonatal and Pediatrics- ALL blood products are ordered per kilogram

BLOOD COMPONENT	RATE	
Red Blood Cells	can be administered over 2-4 hrs	
Plasma (FFP)	can be administered over 1 hour	
Platelets	can be administered over 1-2 hrs	
Cryoprecipitate	as rapidly as tolerable	
Granulocyte	can be administered over 1 hour	