

## ADMINISTRATION OF BLOOD COMPONENTS IN THEATRES

This process covers specific aspects of the transfusion process in surgical theatres. Please refer to [TRUST POLICY FOR THE TRANSFUSION OF BLOOD AND BLOOD COMPONENTS](#) (RDH site specific) for all general blood transfusion processes and guidance.

1. Safe Transfusion Practice, Blood, and Blood components in the Operating Theatre
  - Operating theatres have satellite blood refrigerators that can store blood closer to the patient who is risk assessed that they may need transfusing due to the nature of their procedure. Blood should be kept in a blood bank refrigerator until needed.
  - Only one unit at a time is recommended for transfer. If blood loss is so acute that more than one unit at a time is needed, blood must be transported and stored for up to 2 hours in a specially designed blood storage box supplied by Blood Bank.
  - If blood is taken in a box, the register form stays in Blood Bank.
  - Care must be taken to either return to Blood Bank or the satellite blood refrigerator within the 2 hours if not required for transfusion. This will maintain the storage cold chain and then unit could be allocated to another patient and not wasted.
  - Care must be taken to keep box lid closed whenever possible to keep blood cool. Failure to do so may result in unnecessary wastage.
  - When blood is returned to the local satellite blood refrigerator, the unit will be signed into the refrigerator using the Blood Product Return Form with name of the person returning the blood, unit number, date, and time. This is kept on a clip board next to the refrigerator or in the refrigerator (general theatre satellite fridge)

## RDH site specific

### 2. Positive Patient Identification during surgery

- Pre-transfusion bedside checklist (located at the back of Blood Transfusion Record and Prescription Chart) MUST be used to check blood prior transfusion to patient.
- Every patient receiving blood transfusion should be wearing wristband.
- However, it is recognised, during surgical procedures, that the wrist band may not be accessible. This is usually due to being covered in surgical drapes and the sterile field may be compromised if searching for the wristband, or the surgeon is at a critical stage of the operation.
- If this is the case, the patients consent form has been authorised for this check to establish positive patient identification (PPI), as this has been checked against the wristband at the WHO stop moment prior to surgery.

### 3. Blood warmers

- Blood warmers must be CE- marked commercial blood warmers and used according to manufacturer guidelines. All staff preparing blood warmers must be trained and competent in their use.

### 4. Rapid infusion devices

- There may be a need to use rapid infusion device in managing of massive haemorrhage situation. They must be CE- marked and used according to manufacturer instructions. All staff using such device must be trained and competent in their use.