

## Blood Products Issued for Ambulance Facility Transfer v2.2

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### 148355.913 Blood Products Issued for Ambulance Facility Transfer

#### Copy of version 2.2 (approved and current)

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**Organization** Bassett Medical Center Lab

#### Comments for version 2.2

Per Divya: Removed all references to ARC transfer form; all unit transfer follow-up is now entered electronically in BloodHub.

#### Approval and Periodic Review Signatures

Type	Description	Date	Version	Performed By	Notes
Approval	Lab Director	5/14/2023	2.0	Ghazala Nathu MD Clinical Laboratory Director (S00134)	
Approval	Lab Director	5/11/2023	2.0	John Fisk MD Clinical Laboratory Director (M08480)	
Approval	Lab Director	5/11/2023	2.0	Samantha Davenport MD Service Line Chief (M03764)	
Approval	Lab Director	5/9/2023	2.0	Timothy Chapman MD Clinical Laboratory Director (M11669)	
Approval	Lab Director	5/9/2023	2.0	Valerie Bush PhD Clinical Laboratory Director (M05512)	

#### Version History

Version	Status	Type	Date Added	Date Effective	Date Retired
2.2	Approved and Current	Minor revision	5/24/2023	5/24/2023	Indefinite
2.1	Retired	Minor revision	5/22/2023	5/22/2023	5/24/2023
2.0	Retired	Initial version	5/8/2023	5/14/2023	5/22/2023

## BLOOD PRODUCTS ISSUED FOR AMBULANCE FACILITY TRANSFER

### PURPOSE

The Transfusion Services of Bassett Healthcare Network Laboratories is responsible for documentation of units which are sent from Network hospitals during a facility transfer of patients. Instructions for nursing are included to assure appropriate documentation. **Bassett Healthcare Network does not issue units directly to Ambulance personnel.**

Units infused in the ambulance remain in the patient's Blood Bank history as Transfused. If the units are not infused, they are considered transferred to the receiving facility and do not become a part of the patient's history. Distinguishing between these two outcomes is important for look-back purposes and billing.

### PROCEDURE

The Blood Bank at the transferring hospital is notified of a patient's pending transfer to another facility by nursing or patient provider. Units are then issued from the Transferring hospital's Blood Bank to an RN or other hospital-approved clinician for the patient being transferred. In addition to issuing the units, the following occur:

- a. An appropriate validated container (red cells, plasma, or platelets) is selected. Container is designated: **"For Transport of product only with Patient during Facility Transfer"**

**Note:** If the transport service requests to use their own container, contact the pathologist for approval and complete an Exceptional Release form. Follow-up occurs the next business day to obtain validation records.

- b. The units are packed according to American Red Cross (ARC) product packing instructions.
- c. Paperwork included with transfer of blood products:
  - a) **Blood Transfusion Transfer Orders** (DOH-5210)
    1. Give to provider supervising patient transfer at the time Blood Bank is notified of pending transfer.
    2. BB Tech completes top with: Patient name, date of birth, medical record number, transferring hospital name, receiving hospital name.
    3. Pack the following forms in the validated container. Advise the nurse that paperwork is in the container.
  - b) **BloodHub**
    1. Complete workflow within BloodHub for the units being transferred. This is completed after follow-up with the receiving hospital.
  - c) **Vitals Sheets** (H-3090)
    1. One per unit transferred, to provide form for documentation of patient vitals during transfusion.
  - d) **Transfusionist Instructions for Infusion of Blood Products During Facility Transfer**
    1. An instruction sheet provided to the Transfusionist.
  - e) **Envelope**
    1. Envelope addressed to Transferring hospital is included to allow return of completed Transfusion Orders, Transfusion Record, and Vitals sheets.

2. Record patient name, Medical Record Number, unit numbers, and facility receiving the patient on the “**Blood Products Packed and Transported with Patient**” log sheet. Blood Bank staff will use this information the next day to follow-up with the receiving facility.

#### **SUSPECTED TRANSFUSION REACTION DURING PATIENT TRANSFER:**

Refer to the **Transfusion Reaction Workup** procedure if a suspected transfusion occurs during patient transfer.

#### **FOLLOW-UP**

1. Contact the receiving facility the next day shift.
2. Determine if the units were transfused to the patient or if the units were entered into the facility’s inventory.
3. Document unit status on “**Blood Products Packed and Transported with Patient Log**.”
4. If units have been transfused, follow up is complete.
5. If units are not transfused, the units are updated in WELLSKY from transfused to Shipped Out. ARC must be updated of the unit transfer status by using ARC’s on – line program BloodHub (Connect).
6. Units returned to Transferring hospital’s Blood:
  - a. Units returned, in a validated container, are acceptable to return to inventory as long as wet ice remains and the return is within 24 hours.
  - b. Units returned in the Transport service’s container (not a validated container) are quarantined until validation records for that container can be obtained from the Transport service.
  - c. If validation records are not available, the units are discarded.
  - d. If validation records are available, and documentation is acceptable, units are returned to inventory.
  - e. If the units were never shipped out (returned to the Blood Bank from the floor within 24 hours, with wet ice if necessary), update the status in WELLSKY as returned.

#### **TRANSFUSIONIST INSTRUCTIONS FOR INFUSION OF BLOOD PRODUCTS DURING FACILITY TRANSFER**

Blood products issued to Nursing from Transfusion Services are packed in validated American Red Cross shipping containers appropriate for blood product storage during patient transport. The blood products must remain in the containers until the Transfusionist is ready to infuse the product.

1. Transfusionist appropriately identifies the patient by checking the name and medical record number on the wristband, and unit number, blood type, expiration date on the unit, then comparing all this information to the unit tag attached to the blood product.
2. Paperwork included with transfer of blood products:
  - a. **Blood Transfusion Transfer Orders** (DOH-5210)
    1. Physician must document if a patient is to continue transfusion during transport if a unit has been started, or, if patient is to receive product in route.
  - b. **BloodHub**
    1. Complete workflow within BloodHub for the units being transferred. This is completed after follow-up with the receiving hospital.
  - c. **Vitals Sheets** (Print Shop H-3090)
    1. One per unit transferred, to provide form for documentation of patient vitals during transfusion.

- d. **Transfusionist Instructions for Infusion of Blood Products during Facility Transfer**
    1. Instruction sheet provided to the Transfusionist.
  - e. **Envelope** addressed to Transferring hospital's Blood Bank is included to return completed Transfusion Orders, Transfusion Record, Vitals sheets, and unit tags.
3. Vital signs are obtained:
    - a. Within 15 minutes from starting the unit.
    - b. 15 minutes after the unit has been started
    - c. Hourly **after the start of the unit**.
    - d. Within 30 minutes after completion of the unit
  4. Document on unit tag:
    - a. Transfusionist and second signature, start Date/Time, end Date/Time
    - b. Reaction: No/Yes.
    - c. If a reaction occurs, complete reverse side of unit tag.
      - Contact patient providers at receiving and sending facilities.
      - Contact Blood Bank.
    - d. An envelope is included with the transport container. Use this to return completed Transfusion Orders, Transfusion Record, Vitals sheets, and unit tags.
  5. After arrival at receiving facility, if any units have not been transfused, ensure container is taken to receiving facility's Blood Bank to incorporate the units into their inventory.
  6. Return the empty validated transport container to Blood Bank.

**BLOOD TRANSFUSION TRANSFER ORDERS**

**BMC**

**FOX**

**FTT**

**OCH**

**LFH**

**CRH**

**Form DOH-5210**

<b>Patient Name (Print)</b>	<b>DOB</b>
<b>Patient ID</b>	<b>Date</b>
<b>Transferring Hospital Name:</b>	<b>Receiving Hospital Name:</b>

<b>Continue Transfusing:</b>	<b>Number of Units:</b>	<b>Rate (ml/hr)</b>
Red Cell Products		
Thawed Plasma		
Apheresis Platelet		
KCentra (-indicate in International Units)		

<b>Additional products to be transfused during transport:</b>	<b>Number of Units:</b>	<b>Rate (ml/hr)</b>
Red Cell Products		
Thawed Plasma		
Apheresis Platelet		
KCentra (-indicate in International Units)		

**Special Instructions/Requirements:** Circle if needed: CMV negative Irradiated

Ordering Physician: \_\_\_\_\_

Print Name

Signature

Phone Number

**Section below to be completed by Ambulance Transfusion Service Personnel (RN):**

**Ambulance Service:** \_\_\_\_\_ **NYS-EMS ID#** \_\_\_\_\_  
 \_\_\_\_\_ **NYS-EMS ID#** \_\_\_\_\_  
**RN/EMT:** \_\_\_\_\_ **PCR#** \_\_\_\_\_

**Remarks:**

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