INTER-HOSPITAL TRANSFER AND BLOOD TRANSFUSION

Staff this document applies to:

Austin Operating Suite, Radiology, Blood Bank

State any related Austin Health policies, procedures or guidelines:

- Requesting Blood for Emergency and Non-emergency Transfusion
- Collecting Blood Components and Blood Products from the Austin Blood Bank (Austin Hospital)
- Changing Unknown Patient Identities Safely During Urgent Blood Transfusions

Background:

This procedure informs staff on how to deal with blood that has arrived with a patient from another health service.

Occasionally patients who are transferred to the Austin from other health services are actively bleeding and require ongoing blood transfusion support. These patients may be accompanied by blood components that have been cross matched at a laboratory other than Austin Pathology.

Austin Health provides a pathology service for the Mercy Hospital for Women (MHW). Occasionally patients are transferred from the MHW to the Austin for elective and urgent surgery/radiological interventions. These patients may have had blood crossmatched by Austin Pathology for their MHW admission i.e. using MHW identifiers.

There are safety concerns about using blood components that arrive with the patient from another health service. These include:

- Being able to adequately identify the patient and the blood component given the admission details and paperwork are from another health service, not familiar to Austin Health staff.
- Being satisfied that the blood has been stored appropriately during transit.

Principles of Management:

When the patient arrives with a blood transfusion in progress

If a patient is transferred from another hospital with a blood transfusion in progress, continue with the transfusion if the administration time has not exceeded four hours.
When the patient arrives accompanied by units of blood crossmatched for transfusion

As a general rule, blood should not be sent with the patient unless it is expected to be administered en-route. Blood components accompanying the patient should be sent to blood bank for evaluation of storage conditions and a new pre-transfusion specimen/request to re-crossmatch the units for the patient’s Austin presentation as soon as possible. Blood bank generally finds that blood sent with patients from other hospitals needs to be discarded because the storage conditions have not been documented or adequate.

However, there may be circumstances where the patient is actively bleeding and time does not allow for the blood to be re-crossmatched. Or, the patient is not admitted to the Austin and is using a service such as radiology with the intention of returning to their primary hospital. In this situation the treating clinician has two options:

Option 1

If a decision is made to administer the unit/s of blood that have accompanied the patient, the clinician will take full responsibility to satisfy themselves that the patient can be adequately identified by way of an intact wristband that contains the patient's surname, given name(s), UR number and date of birth and that these details are identical to those on the blood unit label and accompanying paperwork. The clinician must also be satisfied that the blood has been stored in appropriate conditions to permit the component to be used. The clinician accepts all responsibility for any possible adverse outcome from the transfusion.

Evaluation of transport conditions

i. Transfers from Mercy Hospital for Women (MHW)

   Blood accompanying the patient from the MHW may be accepted provided that the transit time from dispatch at MHW to Austin is not in excess of 30 minutes. This can be established by direct enquiry with staff at MHW.

ii. Transfers from Other Hospitals

   Due to the inconsistent packaging of blood in transit between health services, it may be difficult for clinical staff to determine whether storage conditions have been adequate during transit without consulting Austin blood bank staff. Clinical staff should contact blood bank for advice when blood has arrived with a patient in this setting.

Option 2

Take a pre-transfusion sample and liaise with the Austin blood bank about supporting the patient with emergency O negative red cells until crossmatched blood is available.

Regardless of the decision, a pre-transfusion sample and request form must be sent to the blood bank if further blood transfusion support is anticipated.

Any unused blood components must be returned to blood bank where they will be returned to inventory if transfusion is no longer required and the components have satisfied appropriate storage or discarded if they are no longer suitable for transfusion. The blood bank scientist will also contact the sending facility to inform them of the fate of the units so that they can be entered into their system to meet the legal requirements for blood and blood product traceability.
When in doubt discuss with the on call laboratory haematologist, or request the release of emergency O negative blood.

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