### Collecting the initial blood sample

1. Wash your hands and don PPE if appropriate.

2. Ask the patient to tell you their name and date of birth and then compare this to their identification bracelet to make sure they match.

3. Perform venepuncture to collect a blood sample into an appropriate bottle for blood group analysis (typically a pink-topped blood bottle).

4. Fill out the patient’s details onto the blood bottle at the bedside immediately after taking the sample.

5. Sign the blood bottle to confirm you have personally obtained the sample.

6. Complete the associated blood transfusion form.

7. Ensure consent for blood transfusion has been obtained.

8. Dispose of the relevant equipment into a clinical waste bin and wash your hands.

### Prescribing the blood transfusion

1. Each unit of blood should be prescribed separately on its own line.

2. When writing out a prescription for a blood transfusion, each unit of blood should be prescribed as “PACKED RED CELLS”.

3. The prescription should include the time and date of the infusion, as well as the indication for the transfusion.

4. In non-urgent scenarios, a unit of blood is typically transfused over a 2-3 hour period.

### Checking the blood transfusion

1. Wash your hands and don appropriate PPE.

2. Request a colleague (nurse or doctor) to assist you with checking the blood transfusion.

3. Ask the patient to tell you their name and date of birth and then compare this to their identification bracelet, medical notes and blood compatibility report to ensure they all match exactly.

4. Check the blood group and serial number on blood bag matches the compatibility report.

5. Check the expiry date and time on the unit of blood to ensure it has not expired.

6. Inspect the blood bag for signs of tampering, leaks, discolouration and clots.

### Administering the blood transfusion

1. Wash your hands and don appropriate PPE (if not done so already).

2. Attach the giving set to the blood bag and run some blood through the tubing to expel any air.

3. Once all air has been expelled from the tubing, attach the other end of the giving set to the cannula port.

4. Set the rate at which the blood should be transfused over (typically 2-3 hours in non-urgent scenarios).

5. Dispose of the relevant equipment into a clinical waste bin (including PPE) and wash your hands.
Document the time and date the transfusion was started and both you and your colleague will need to sign to confirm all checks were carried out prior to administration.

<table>
<thead>
<tr>
<th>6</th>
<th>Monitoring the patient during the blood transfusion</th>
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</thead>
<tbody>
<tr>
<td></td>
<td><strong>1</strong> The patient's baseline observations should be checked at 0, 15, 30 mins from the onset of the transfusion</td>
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<tr>
<td></td>
<td><strong>2</strong> Observations can then be performed on an hourly basis and again when the transfusion has finished</td>
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</tbody>
</table>

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