# SOP Template: Blood Product Verification and Bedside Check Steps

This SOP details the **blood product verification and bedside check steps**, emphasizing accurate patient identification, matching blood products to patient records, verifying blood type compatibility, and ensuring correct documentation. It aims to prevent transfusion errors by standardizing procedures for healthcare professionals during blood administration, ensuring patient safety through thorough verification before, during, and after transfusion.

# 1. Purpose

To standardize the process for blood product verification and bedside checks to prevent transfusion errors and ensure patient safety.

# 2. Scope

This SOP applies to all healthcare professionals involved in administering blood and blood products in the facility.

# 3. Responsibilities

- Registered Nurses (RNs): Must perform verification and bedside checks in accordance with this SOP.
- Physicians: Must order blood transfusions and support adherence to protocol.
- Blood Bank/Transfusion Service: Prepares, labels, and provides the correct blood product.

# 4. Required Materials

- · Patient identification band
- Blood product with compatibility label
- Blood product documentation form/electronic chart
- Personal protective equipment (PPE) as per infection control protocol
- Two qualified staff members (e.g., RNs)

## 5. Procedure

## 1. Obtain Blood Product from Blood Bank:

- Verify physician's blood transfusion order.
- o Collect blood product with proper documentation and product label.

#### 2. Initial Verification in Clinical Area (Away from Bedside):

- Two qualified staff members verify:
  - Patient's full name and identification number (from wristband and medical record).
  - Blood product compatibility label: patient name, medical record number, blood group/Rh, blood product type, donation number, expiry date/time.
  - Check blood product for discoloration, clots, leaks, or cloudy appearance.
  - Confirm crossmatch/compatibility report if applicable.
  - Document completion of initial verification.

#### 3. Bedside Check with Patient:

- Bring blood product and documentation to the patient's bedside.
- o Introduce both staff members; explain procedure to patient (if conscious).
- With two qualified staff members:
  - Use at least two patient identifiers (e.g., full name, identification number, date of birth).
  - Compare the patient's wristband, blood compatibility label, and medical record.
  - Reconfirm blood product (type, ABO/Rh, unit number, expiry date/time) and patient details match order and documentation.
  - Confirm there are no discrepancies.
  - Have both staff members sign off/document the bedside check.

#### 4. Pre-Transfusion Vital Signs:

- Record baseline vital signs as per institutional policy.
- 5. Commence Transfusion:
  - Start transfusion as per SOP for specific blood product.
  - Stay with patient and monitor for adverse reactions especially during initial period.
- 6. Ongoing Monitoring and Documentation:

- Monitor and record vital signs at intervals according to policy.
- o Observe patient for signs of transfusion reaction (rash, fever, chills, dyspnea, etc.).
- o Document all findings and actions taken.

#### 7. Post-Transfusion Check:

- Record post-transfusion vital signs.
- o Monitor patient for delayed reactions, as appropriate.
- Ensure all transfusion documentation is complete and accurate.

## 8. Dispose of Used Blood Product Bags:

- o Dispose of blood bags and tubing as per biohazard waste protocol.
- Return unused portions to blood bank if required.

## 6. Documentation

- Ensure detailed documentation of all verification steps, time of checks, product information, personnel involved, and patient responses.
- Document any variance or adverse events according to institutional protocol.

## 7. Related Policies

- Transfusion Reaction Management Policy
- Blood Product Storage and Transportation Policy
- Patient Identification Policy

## 8. References

- World Health Organization. Blood Transfusion Safety.
- Institutional Blood Transfusion Practices Manual.
- Local/National Transfusion Guidelines.

# 9. Revision History

Date	Version	Description	Author
2024-06-15	1.0	Initial SOP template created	SOP Team

NOTE: Deviations from this SOP must be justified, documented, and reported following institutional guidelines.