# **Standard Operating Procedure (SOP)**

# **Proper Technique for Blood Product Administration**

This SOP details the **proper technique for blood product administration**, encompassing patient identification and consent verification, blood product compatibility checks, preparation and handling of blood components, aseptic techniques for intravenous access, monitoring for transfusion reactions, documentation of transfusion details, and post-transfusion patient care. The objective is to ensure safe and effective blood product administration while minimizing risks and adverse events.

# 1. Purpose

To outline the steps for safe and effective blood product administration and reduce the risk of transfusion-related adverse events.

# 2. Scope

This SOP applies to all healthcare staff involved in blood product administration.

# 3. Responsibilities

- Healthcare practitioners responsible for transfusions must adhere to this SOP.
- Clinical supervisors must ensure staff competence and compliance.

#### 4. Procedure

#### 4.1. Patient Identification and Consent

- Verify patient identity using at least two unique identifiers (e.g., full name and date of birth).
- Ensure informed consent for transfusion has been documented.
- Check for any previous adverse reactions or special transfusion requirements.

### 4.2. Blood Product Compatibility Check

- Confirm blood product label matches the transfusion order and patient details.
- Verify ABO and Rh compatibility and expiry date.
- Perform an independent second-person verification prior to administration.

#### 4.3. Preparation and Handling

- Inspect blood components for discoloration, clots, leaks, or abnormal appearance.
- Store and handle blood products per manufacturer's and hospital guidelines.
- Ensure all transfusions are initiated within 30 minutes post-issue and completed within 4 hours.

#### 4.4. Aseptic Technique and Intravenous Access

- Apply strict aseptic technique when preparing and accessing IV lines.
- Use appropriate gauge cannula as per patient and product requirements.
- Prime IV line with 0.9% sodium chloride-not dextrose or calcium-containing solutions.

#### 4.5. Monitoring During Transfusion

- Baseline vital signs before transfusion.
- Monitor and record vitals at 15 minutes post-initiation, hourly during, and upon completion.
- Observe for signs of transfusion reactions (fever, chills, back pain, rash, hypotension, etc.).
- If a reaction is suspected: stop the transfusion immediately, maintain IV access, and inform the physician.

#### 4.6. Documentation

- Complete all documentation: product type, unique product number, volume, start/end times, and staff involved.
- Document observations, any symptoms or adverse reactions, and actions taken.

#### 4.7. Post-Transfusion Care

- · Monitor patient response and document clinical status following transfusion.
- Dispose of blood bags and tubing per biohazard protocol.
- Report any adverse reactions to the transfusion service and complete an incident report as necessary.

# 5. References

- Facility transfusion policy and guidelines
- World Health Organization (WHO): Blood Transfusion Safety
- National/Local Regulatory Guidelines

# 6. Revision History

Date	Version	Description	Author
2024-06-09	1.0	Initial SOP release	Al Assistant