THE ROYAL WOLVERHAMPTON NHS TRUST

Specialist Clinical Practice Renal Unit sub-committee

Practice Reference:	SNCP24
Title:	The clinical administration and management of blood and blood products during haemodialysis treatment .
Date of Implementation:	April 2008
Version:	V2
Review dates:	April 2010, July 2013
Date of review:	March 2015
Date of next review:	March 2018
Author's title:	Renal Advanced Nurse practitioner
Practice Location:	Renal Unit Specialist Clinical Practice Folder/Trust Intranet

1.0 Practice Statement

1.1 To reduce the risk of infection and to ensure patient safety during the administration of blood and blood products.

1.2 This practice must be undertaken by a renal trained nurse or RN with training from a Renal nurse and assessed to be competent

1.3 A peer review suggests that a unit of blood should be administered between 30-40 minutes allowing at least 30 minutes of dialysis to occur post blood transfusion

2.0 Equipment

- IV Blood giving set
- Y connector
- 10mls 0.9% normal saline
- 1 x 5ml syringe

- Blood product
- Personal, protective equipment (PPE)
- Tympanic thermometer

3.0 Detailed Action

3.1 Provide patient with explanation of procedure, and obtain consent
Wash hands with soap and water and dry thoroughly

3.2 Apply personal, protective equipment.

3.3 Ensure collection, receipt and bedside checking of blood products is performed in accordance with trust policy CP26.

3.4 Perform a set of baseline observations, temperature, pulse and blood pressure prior to transfusion and record

3.5 Prime the Y connector with the 10mls of 0.9% normal saline. Ensure both clamps on each lumen of the Y connector are closed.

3.6 Disconnect the 0.9% normal saline bag attached to the haemodialysis lines (arterial side).

3.7 Attach Y connector to the attachment previously connected to the 0.9% normal saline

3.8 Reconnect the bag of 0.9% normal saline to the blue tipped lumen of the Y connector. Ensure clamp is closed.

3.9 Attach blood product to the IV giving set and prime line with blood prior to connection.

3.10 Connect the primed IV giving set to the red tipped lumen of the Y connector ensuring the clamp on the IV giving set is closed.

3.11 Open clamp on the haemodialysis line and the lumen of the Y connector.

3.12 Slowly open the clamp on the IV giving set and observe drip rate and set accordingly.

3.13 Perform and monitor observations, temperature, blood pressure, pulse, every 15 minutes (or more frequently if indicated) during blood product administration.

3.14 On completion of blood product administration the blood container(s) should be disconnected and disposed of in clinical waste.

3.15 Remove PPE

3.16 Wash hands with soap and water and dry thoroughly.

Note if more than two containers of blood products are to be administered a new giving set must be used following the second administration repeating steps 3.9-3.16.

4.0 Financial Risk Assessment

4.1 Following a Risk assessment of this clinical practice no financial risks have been identified.

5.0 Equality and Diversity Risk Assessment

5.1 Following an Equality and Diversity risk assessment of this clinical practice, no equality and diversity risks have been identified.

6.0 Maintenance

6.1 This clinical Practice will be reviewed and kept up to date by the Renal ANP and the Specialist Clinical Practice Renal Sub- Committee workgroup will recommend changes and amendments.

7.0 Training

7.1 All staff undertaking this practice must have received training to include:

Demonstration of practice
Supervised practice

All staff undertaking the procedure must have been competency assessed and deemed competent in the procedure by a competent practitioner.

8.0 References

Administration of blood and its components during HD. COP 61 University Hospitals of Coventry and Warwickshire.

CP26 Blood Transfusion Clinical Practice. Royal Wolverhampton NHS Trust.

Handbook of Transfusion Medicine Fifth edition January 2014 Joint UK Blood Transfusion & Tissue Transplantation Services Professional Advisory Committee.