

TARGET	UNIVERSITY HOSPITAL WISHAW
AUDIENCE	WOMEN'S SERVICES DIRECTORATE
PATIENT GROUP	All Obstetrics and Gynaecology Patients

Clinical Guidelines Summary

Introduction

It is the responsibility of the registered practitioner, in line with their professional body, to ensure that they are trained and competent to participate in the sampling process relevant to their role.

Before taking on any transfusion task clinical staff **MUST** complete mandatory Learn ProBlood Transfusion: Safe Transfusion Practice accessible via Learn pro and/or TURAS Learn available at https://learn.nes.nhs.scot/

This guideline is to assist and guide all health care professional who draw blood for possible transfusion, in the correct safe process to do so.

Lead Author	Moira Caldwell Transfusion Practitioner	Date approved	February 2025
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Procedure – all samples

A request to the laboratory for grouping and/or compatibility (crossmatch) testing and to request blood components must be made on a blood transfusion request form. Registered nurses/midwives or medical staff can request pre-transfusion testing for a Group and Save (G&S). Crossmatch requests can only be requested by medical staff, ANPs, ACCPs or by registered healthcare professionals that have successfully completed the Non-Medical Authoriser (NMA) of Blood and Blood Components course facilitated by SNBTS Transfusion Team.

The patient **must** be wearing a patient ID band if they are an inpatient. Patients being cared for via Out-Patients and community antenatal settings, where a wristband will not be worn, extra care must be taken to ensure the correct patient is being bled:

- Bleed 1 patient at a time
- A request form must be completed in the patient's presence (and signed as appropriate) in advance of the sampling process.
- Patient labels are preferred on the request form as this reduces transcription errors around patient ID
- The request form and sample tube must include, the patient's forename (no abbreviations), surname, date of birth, CHI (Community Health Index) number or use of a unique numbered label system that allows an unambiguous link to be established between the patient, the sample and gender.
- The request form must also include location, clinical details and an indication of urgency
- Transfusion requests: Signature and details of the person making the transfusion request and the date and time the sample was taken. Plus, signature of person

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taking the sample if different. Any specific transfusion requirements must be documented.

- Samples taken in the community should specify where and when the patient will attend for transfusion.
- The patient must be asked to positively identify themselves (full name and date of birth)
- Check the completed request form with the wristband or with the patient ID
- Never pre-label tubes
- Label all samples beside the patient:
 - o **Transfusion samples** must be hand written
 - All other samples a patient label is acceptable on the bottle

Further information for Transfusion samples

The laboratory operates a "zero tolerance policy", no samples will be accepted under any circumstances if they lack core identifiers or date of sample. Transfusion request forms and samples which are not completed fully and accurately will **not** be processed and the requester will be contacted and required to send a repeat sample. Samples or forms with changes or over-written details will **not** be accepted. Sample rejections are recorded and managers will be notified of poor performing staff

"Cold samples"
This practice IS TO STOP (NEW 2021)-

The Obstetric Blood Transfusion Group has identified this as a potential Transfusion Risk

"Cold samples" were samples that were taken earlier by another member of staff, attached to the case notes, awaiting possible later testing (Cold samples even if labelled by the taker; may have the request form later filled in by another member of staff.)

For any sample taken for Group and Save the sampling guide must be followed

- The request form should be completed **before** the blood sample is taken.
- The patient must be asked to positively identify them self by giving their full name (first and last name) and date of birth prior to being bled. This must be

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checked against the details on the request form and what is on the patient identification band.

- The full name and date of birth stated by the patient must EXACTLY MATCH
 the information on the patient's identification band and the information on the
 request form.
- Once blood has been drawn, label the tube by hand at the bedside
- The person taking the sample must sign the sample tube
- The sample should then be sent to the Lab

CORD BLOODS – all RH negative patients at delivery

Patient blood – 1 pink top bottle

1 purple top bottle

1 transfusion request form only (patient details only)

Cord Blood – 1 pink top bottle

1 purple top bottle

1 Haematology form (baby's details only)

Cord samples **must** be completed with CHI, date and time of birth. The laboratory is not able to accept cord samples without a CHI. All forms and samples must be signed.

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References/Evidence

S. Robinson, A. Harris, S. Atkinson, C. Atterbury, P. Bolton-Maggs, C. Elliott, T. Hawkins, E. Hazra, C. Howell, H. New, T. Shackleton, K. Shreeve, C. Taylor (2017) The administration of blood components: a British Society for Haematology Guideline The administration of blood components: a British Society for Haematology Guideline - Robinson - 2018 - Transfusion Medicine - Wiley Online Library

NHS Lanarkshire Clinical Blood Transfusion Policy 2024 <u>Clinical-Blood-Transfusion-Policy | NHS Lanarkshire</u>

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Appendices

1. Governance information for Guidance document

Lead Author(s):	Moira Caldwell Transfusion Practitioner
Endorsing Body:	Maternity Clinical Effectiveness Group Maternity Transfusion Group Overarching Transfusion Committee
Version Number:	5
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Responsible Person (if different from lead author)	

CONSULTATION AND DISTRIBUTION RECORD			
Contributing Author / Authors Heather Daniels, Transfusion Practitioner Josie Davidson Laura Fraser, Transfusion Practitioner Moira Caldwell, Transfusion Practitioner			
Consultation Process / Stakeholders:	Maternity CEG and Maternity Blood Transfusion Groups process		

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Distribution	All in Maternity

CHANGE RECORD

OTIANOL IN	CHANGE RECORD			
Date	Lead Author	Change	Version No.	
September 2007	Heather Daniels (TP), Josie Davidson	Original	1	
February 2011	Heather Daniels (TP), Josie	Update	2	
February 2015	Heather Daniels (TP), Josie Davidson	Update	3	
April 2021	Laura Fraser Transfusion Practitioner	Update	4	
February 2025	Moira Caldwell Transfusion Practitioner	Update	5	

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