**AREA of APPLICATION**

To ensure safe practice the same local procedures for the administration of allogeneic (donor) blood should be followed for the reinfusion of autologous blood. Positive patient identification is essential as the autologous blood is untested and there is a significant risk of ABO-incompatibility if the blood is given to the wrong patient.

**Autologous blood should be kept with the patient at all times.**

**STAFF**

All nursing / medical staff who administer salvaged autologous blood.

**PRESCRIPTION**

Autologous blood should be authorised for the patient in the same way as any other blood or blood component transfusion.

**ADMINISTRATION**

Pretransfusion checks must be completed at the patient’s bedside prior to commencing transfusion to ensure the right patient receives the right blood component:

1. Check the patient’s clinical record for documentation relating to informed consent for cell salvage to be used (if consent prior to use cannot be obtained e.g. in an emergency, information must be given to the patient retrospectively if any cell salvaged blood is reinfused)

2. Baseline observation. Record the patient’s vital signs prior to the start of transfusion.

3. Check that the reinfusion bag is labelled with an "Untested Blood – For Autologous Use Only" label which has been completed to include the patient’s first and last name, date of birth, unique identification number and the date and time of expiry.
4. Identify the patient; if possible, ask them to state their name and date of birth and check that this is consistent with the patient’s identification band. Also, check the full name, date of birth and unique identification number on the pack tag/label matches the patient's identification band exactly².

5. Check the expiry time & date on the reinfusion bag. Discard any expired blood in accordance with local hazardous waste management procedures.

6. Check the reinfusion bag for any signs of leakage, clots or abnormal colour.

7. Administer blood using the filtration giving set provided*. Patient observations (temperature, pulse, BP and respiratory rate) should be performed and recorded in the same way as for transfusion of allogeneic blood, in accordance with the Organisation’s Blood Transfusion Policy. Additional observations are at the discretion of clinical staff based on individual patient assessment.


*Where a combined intraoperative & postoperative system is being used and the final product is washed, a standard blood administration set is adequate.

Reference


The information contained in this Technical Factsheet has been sourced from members of the UK Cell Salvage Action Group (UKCSAG) and is generally agreed to be good practice. The UKCSAG does not accept any legal responsibility for errors or omissions.