1: Transfusion ten commandments

Essentials

- Is blood transfusion necessary in this patient?
- If so, ensure:
  - right blood
  - right patient
  - right time
  - right place.

1. Transfusion should only be used when the benefits outweigh the risks and there are no appropriate alternatives.
2. Results of laboratory tests are not the sole deciding factor for transfusion.
3. Transfusion decisions should be based on clinical assessment underpinned by evidence-based clinical guidelines.
4. Not all anaemic patients need transfusion (there is no universal ‘transfusion trigger’).
5. Discuss the risks, benefits and alternatives to transfusion with the patient and gain their consent.
6. The reason for transfusion should be documented in the patient’s clinical record.
7. Timely provision of blood component support in major haemorrhage can improve outcome – good communication and team work are essential.
8. Failure to check patient identity can be fatal. Patients must wear an ID band (or equivalent) with name, date of birth and unique ID number. Confirm identity at every stage of the transfusion process. Patient identifiers on the ID band and blood pack must be identical. Any discrepancy, DO NOT TRANSFUSE.
9. The patient must be monitored during the transfusion.
10. Education and training underpin safe transfusion practice.

These principles (which are adapted from the NHS Blood and Transplant ‘Transfusion 10 commandments’ bookmark with permission) underpin safe and effective transfusion practice and form the basis for the handbook.