VMMC & Safdarjung Hospital,
Ministry of Health & Family Welfare,
Government of India, New Delhi.

सत्यमेव जयते

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Document No.	**TITLE**		
E/ NABH/ SJH/ SOP/ 04	**SOP on rational use of Blood and Blood Products**		
Effective Date: 20/07/2020			
Function	**Name**	**Designation**	**Signature**
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Distribution: Quality Cell, Medical Superintendent, Blood Bank, All Head of Departments

REVISION SUMMARY		
Version No.	Effective Date	Revision History
1.0	20/07/2020	00

1.0 INTRODUCTION

All patients requiring transfusion should have reliable access to safe blood products, including whole blood, labile blood components and plasma-derived medicinal products, appropriate to their clinical needs, provided in time and safely administered. Data on the use of blood products are limited, but studies suggest that blood products are often overprescribed in both developed and developing countries.

WHO recommends for the safe and rational use of blood to reduce unnecessary and unsafe transfusions and to improve patient outcomes and safety, thus minimizing the risk of adverse events including errors, transfusion reactions and transmission of infections.

2.0 PURPOSE:

To define policies for rational use of blood and blood products.

3.0 SCOPE:

To define policies for rational use of blood and blood products.

4.0 RESPONSIBILTY:

Doctors,

Nursing staff

Blood transfusion committee

5.0 ABBREVIATION:

NABH : National Accreditation Board for Hospitals and Healthcare providers

COP : Care of Patients

ACLS : Advanced cardiac life support

BLS : Basic life support

NACO : National Aids Control Organization

NOK : Next Of Kin

UHID: Unique identification

WHO: World Health Organization

6.0 REFERENCE:

NABH: Pre Accreditation Entry Level Standards for Hospitals, First Edition, April 2014.

7.0 POLICY:

All activities related to the transfusion of blood should be in accordance with the Drugs and Cosmetics Act, 1945 issued by the Government of India., and NACO guide lines.

A blood transfusion has the potential to be a hazardous and hence a transfusion should only be given if the potential clinical benefits outweigh the potential risks to the patients.

The blood and blood components that are processed and issued only in the licensed blood bank and by trained and authorized personnel. The process and monitoring of the transfusion reaction process will be done only by nursing staff and medical officers authorized and suitably trained.

Without any requisition from medical staff, blood bag or any type of component shall not be issued to the recipient

At the time of transfusion consent for transfusion shall be obtained by the staff nurse after explaining the benefits and the risks involved in transfusion.

All transfusion processes will be monitored for adverse reactions, both hemolytic and non-hemolytic and all adverse outcomes are suitably documented and appropriately treated. All blood bags issued by the blood bank are traceable and such records are maintained by blood bank medical officer

Any type of blood bag once issued will not be accepted if returned to the Blood bank.
On emergency blood will be issued after cross matching
All HIV, Hepatitis positive samples of blood shall be discarded as per Biomedical waste handling rules.

Applicable Laws And Regulations:

- Drugs and Cosmetics Rules, 1945 Part X B and XII B.
- Standards for Blood Banks & Blood Transfusion Services, NACO 2007.

TRAINING OF STAFF:

- Hospital transfusion committee in coordination with HR department is responsible for training the staff on the policies of blood transfusion.
- All staff in blood bank shall be trained in Blood transfusion medicine periodically.

Mode Of Training:

This policy document is available with all the nursing stations, critical care units, operation theaters, nursing superintendent for the staff to be aware of.

Analyzing Transfusion Reactions:

The policy documents details the management of transfusion reactions, the data is compiled by the Blood Bank Officer and is analyzed during transfusion committee meeting conducted quarterly. The committee has the authority to initiate the corrective and preventive actions along with the responsible person.

8.0 PROCEDURE

Blood and blood products used are as follows :

a) Fresh blood products: refers to red cell products (including autologous and directed donations), platelet products, fresh frozen plasma (FFP) and cryoprecipitate.

b) Processed blood products: refers to products such as red blood cells, plasma, prothrombin, and coagulation factors.

Treating doctors shall be responsible for ensuring the appropriateness of each blood / blood product they prescribe for an individual patient.

Treating doctors shall document the indication and outcome of transfusion in the patient's medical record.

Qualified and experienced staff nurse shall administer blood and blood products in accordance with the policy.

All blood and blood products must be checked by assigned staff prior to administration.

Before procurement the patient's blood group shall be checked in the hospital.

On receipt of the blood in the hospital (OT, ICU, Ward etc.) it shall be verified with labels and double checked by the duty nursing staff to ensure that correct blood with the correct group is used for the specific patient.

Test results are also checked.

Blood transfusion procedure shall be started only by a trained staff nurse in accordance the principles of right medications

Patient shall be constantly monitored by the staff nurses.

Staff administering blood and blood products shall havethe responsibility to observe and treat adverse reactions to blood products. All errors, 'near misses' and suspected adverse reactions shall be documented in the patient medical record and reported.

In case any adverse reaction is noticed the procedure shall be stopped and the treating doctor shall be informed immediately.

The patient is reassured and made comfortable during this period.

The treatment may be resumed after receiving further instructions from the doctor or when no further reactions are noticed.

The reason for transfusion should be explained to the patient or his relatives.

Nursing staff shall check the blood and blood products and blood transfusion set attached to the patient under the direct supervision of the Nurse In Charge.

Nurses shall be responsible for the correct and safe administration of blood and blood products in accordance with policy.

Medical staff shall be responsible for the monitoring of the patient during blood transfusion.

The blood transfusion committee shall be intimated in case of any serious reaction taking place which results in stopping or postponing the transfusion.

Leftover blood if any or the empty plastic blood container needle and tubing shall be treated as biomedical waste and disposed of according to BMW management rules, 1998 and as per the Infection Control Policy of the organization.

The department staff is educated through frequent training programmes and is strictly monitored on the adherence to best clinical practices and compliance to the operating procedures.

9.0 VALIDITY STATEMENT

This document is valid for one year from the date of issue.

10.0 APPENDICES AND FORMS

* Annexure A: Amendment sheet
* Annexure B: Training log

Annexure A

AMENDMENT SHEET

VMMC & Safdarjung Hospital, New Delhi

Sr No.	Page No.	Clause No.	Date of Amendment	Amendment Made	Reasons	Signature of Officer In-charge	Signature of Medical Superintendent
1							
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Annexure B

VMMC & Safdarjung Hospital, New Delhi

TRAINING LOG (Contents, Deviation and Amendment)

Sr .No	Training Attendee	Date	Signature
1			
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Officer In-charge