



## Standard Operational Guidance

# Emergency Transfer of Blood and Components with Patients between Hospitals

### Document Control Information

Author	Lutman, Polke	Author Position	Head of Clinical Service, CATS Coordinator
Document Owner	Polke	Document Owner Position	Coordinator
Document Version	3	Replaces Version	2
First Introduced	November 2013	Review Schedule	2 yearly/as required
Active Date	January 2018	Next Review	January 2020
CATS Document Number			
Applicable to	All CATS employees		

Printed copies of this document may not be up to date.  
Always obtain the most recent version from [www.cats.nhs.uk](http://www.cats.nhs.uk).

## Blood Transfer Advice for Clinical Staff

The aim of this document is to ensure we adhere to the guidance laid down by the NHS Blood and Transplant service (NHSBT) in relation to the ad hoc transfer of blood components between hospitals.

- It is important that the same strict rules apply when handling blood products within the transport environment of the critically ill child.
- If blood products for transfer are necessary please request from the DGH as early as possible in the stabilisation phase.
- Good documentation of transfusions is essential in order that full traceability from donor to recipient is maintained and the cause of serious adverse events can be adequately investigated. A permanent record of the transfusion of blood components must be kept in the medical notes.

### Prior to transfer:

- When receiving blood products for transfer please ensure that the blood and blood components have been packed in a transport box following transfusion laboratory guidelines to ensure product quality and safety.
- If blood product anticipated for use during the transfer phase, it must be checked according to policy and attached ready to deliver.
- Ensure laboratory blood component transfer form is attached to the blood transport box
- Ensure that the patient is correctly identified with ID bands in place.
- Discuss the risks and benefits of transfusion with those with parental responsibility
- The Flying Squad Blood is always provided as: O Negative, CMV negative, Irradiated and <10 days old.

### During transfer:

- Please ensure the transport box remains sealed unless blood is required for transfusion. Blood components must be transported appropriately to ensure that they are in optimum condition for use and that the 'cold chain audit trail' is maintained.
- If blood is required during the patient's journey please ensure it is checked and transfused in accordance with best practice.
- Once opened, the 'cold chain' has been broken and if they are to be used the units must be transfused within 4 hours.
- If blood is removed for transfusion, please replace the lid.
- Blood is suitable for transfusion within the timeframe stated on the associated paperwork with the transport box, provided the seal is unbroken.
- Red cells and platelets must never be transported in the same collection box.

**On arrival:**

- When the patient arrives in the receiving clinical area, please ensure the transport box is handed over to the receiving staff member.
- Please state how much blood was transfused during the journey and any adverse events (if occurred).
- The responsibility for the blood now lies with the receiving hospital in line with their local policy.