(A) Policy Statement

Blood and blood products will be stored and handled appropriately while the patient is in the OR.

(B) Purpose of Policy

To provide effective and safe delivery of blood and blood products and to detail steps in obtaining blood and checking blood prior to administration.

(C) Procedure

1. The Registered Nurse (RN) circulator verifies that blood bank ID band is on the patient prior to the case. The Circulating Nurse also verifies number of units ordered and that all available units have been obtained from the Blood Bank and placed in the OR blood refrigerator.

2. Upon request from anesthesia attending or resident, the circulating circulator will obtain the required units from blood refrigerator taking the following steps:
   a. Verifies patient name, six digit ID number, and blood bank unit number on each unit with blood release form attached to door of blood refrigerator.
   b. Signs appropriate area of blood release form with time out and initials.
   c. Verifies presence of temperature indicator attached to each unit.
   d. Places unit(s) on ice in blood cooler before taking into OR.

3. All blood and blood products must be cross-checked as to the blood type, donor number, six digit ID number, and expiration date by two persons prior to administration (usually RN circulator and anesthesia resident or anesthesia resident and attending). The blood transfusion form must be signed by these two persons verifying the cross-check.

4. Blood that is not used immediately must remain on ice in blood cooler with temperature indicator attached.

5. All unused blood must be returned to the OR blood refrigerator as soon as possible by the RN circulator. Each unit returned must be signed in with time and initials on blood release form.

6. At the completion of the case, all unused blood will be returned to the OR blood refrigerator until the patient is discharged from Post Anesthesia Care Unit (PACU). Temperature indicators will be retained in OR blood refrigerator for future use. Following discharge from PACU, the unused blood will be returned to the Blood Bank along with the blood release form.

7. Blood that has been out of the refrigerator and not placed on ice for more than thirty (30) minutes or has had a broken seal, should not be used. This blood should be properly disposed of.
8. Circulator will place used original blood transfusion forms in the chart and will send copies to blood bank via the OR desk at the end of the case. Empty blood bags are discarded in red contaminated trash bags.

9. The OR blood holding refrigerator is regulated in accordance with federal requirements and includes:
   a. Daily temperature log.
   b. Alarm system (audible).
   c. Visual recording chart.
   d. Daily checks of the OR blood refrigerator are the responsibility of the Pathology Blood Bank department.

10. Only blood, blood products, and tissue for transplantation, will be stored in the blood refrigerator.

11. RN circulator will verify that the physician anesthesia attending or resident requests to transfuse blood within 30 min of transportation to Surgical Intensive Care Unit (SICU).

12. Blood will be placed on ice in a blood cooler with temperature indicator attached and transported with patient to SICU.

13. Only blood that will be transfused within 30 minutes will be transported to SICU all other blood and blood products will be cross checked as to blood type, donor number, six digit, ID number and expiration date by two person prior to administration. The blood transfuser form must be signed by two person verifying the cross check.

14. The blood that is in SICU and not used within 30 minutes will be returned to the blood bank.

Approved by:

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It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.