

Clinical Dialysis/Patient Care/General Patient Care

Blood Transfusion Criteria

Application:

This policy applies to all NKC staff that accept orders for blood transfusions from nephrologists.

Policy:

Northwest Kidney Centers has identified criteria for the ordering and administration of blood transfusions at NKC facilities. Blood transfusions should be avoided in all patients who are actual or potential transplant patients.

1. Informed consent for blood transfusion should be obtained by the nephrologist or their surrogate on the "NKC Consent for Blood Transfusion" form and faxed to the Unit prior to the blood transfusion being given. Informed consent may also be obtained over the phone and faxed to the physician for signature.
2. Blood transfusion consent will be good for the duration of the treatment at NKC.
3. Blood may be ordered for type and cross match but must be "held" until the consent is in the chart.
4. If hemoglobin level is below 8gm/dl the transfusion can be given without meeting other criteria.
5. Stable patients with a hemoglobin greater than 8gm/dl require documented medical justification e.g. angina on exertion or a decrease of hemoglobin of 2 points over 2 weeks and the hemoglobin is at 9gm/dl or lower, underlying hematologic disorder, etc.
6. Unstable or other patients that require an immediate blood transfusion (e.g. GI bleed), do not require prior approval or need to meet other criteria.
7. The blood transfusion should not be for more than 2 Units/treatment.
8. Blood transfusions for stable patients should not be given more than once/month.
9. For patients on the transplant list receiving a blood transfusion, the transplant center should be notified by the Unit when the transfusion occurs.

Northwest Kidney Centers

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10. Transfusions in the following patients should be avoided if possible; previously transplanted, already sensitized, or multiparous women.

Procedure:

1. Nurses may take an order for a blood transfusion only if the above criteria are met. The blood should be leuko-reduced RBC's.
2. Consent for the blood transfusion must be sent to the Unit before the blood can be given. The blood can be drawn for type and cross-match and held at the blood bank until the consent is obtained.
3. The nephrologist and/or transplant center must notify the nurse if the patient is in a high risk transfusion group. The nurse will enter a flag in CyberREN on the "Nurses Worksheet" under transfusions. The nurse should check the transplant status on the worksheet to make sure the patient is in a high risk category.
4. Blood should be administered per NKC blood transfusion procedure.