

# Optimization of Transfusion Administration Process: A Quality Improvement Process

Nannette Berg, MA-OL, BSN, RN & Jennifer Togioka, MS, BSN, RN



## Background

- Blood transfusion is a low-frequency procedure for most nurses
- Transfusions carry inherent patient risk
- Regulatory standards are in place to ensure patient safety during transfusion events
- Transfusion documentation within the electronic health record is described as fragmented, confusing, and devoid of "hard stops" to ensure completion of required elements
- Manual audits of transfusion events are labor-intensive for nurse leaders
- Checklists have proven helpful to organize tasks with multiple steps
- Technology can be leveraged to assist nurse leaders in auditing transfusion documentation compliance

## Purpose

- Increase clinical nurse compliance with regulatory transfusion documentation
- Reduce time required of nursing leaders for manually auditing transfusion events in the EHR

## Methods

To improve transfusion regulatory compliance in a large medical center, a regulatory transfusion documentation checklist was developed in late 2020 based upon review of hospital policies, regulatory requirements, and stakeholder input. A paper copy of the checklist was supplied by blood bank with every non-emergent blood unit to be transfused.

Upon completion of the paper form, the nurse returned the checklist to the manager for review against dashboard data. To streamline ongoing transfusion compliance audits, an EHR-linked transfusion dashboard was created and shared with all nurse managers to illustrate individual nurse compliance on the six aspects of regulatory transfusion documentation.



**PHSOR Blood Product Continuous Use Tool**

Complete and Return to Manager

Patient Label

Blood unit number/sticker

Date/Time of transfusion start

Date/Time of transfusion stop

- Verify Consent (paper and document verification in EPIC)
- Complete pre-transfusion vital signs (T, BP, HR, RR)
- Two RN verification documented
- Complete set of vital signs 15 minutes after start
- Documentation of hourly VS during transfusion (T, BP, HR, RR) (Q30 minutes if Peds/NICU)
- Stop time of transfusion document rate "0"
- Document volume of transfused product
- Stop time vital signs (T, BP, HR, RR)
- Document suspected reaction in EPIC (Yes or No)
- Document blood administration charge (# of units given) – Not for ED/Peri-op use
- Peer review of documentation \_\_\_\_\_ (reviewer initials)
- Complete transfusion in EPIC (Right click on transfusion row and choose complete)

Transfusing RN Name \_\_\_\_\_

