



Skills Modules 3.0 Checklist: Blood Administration

Administering Blood and Blood Products

INSTRUCTIONS: Use the following checklist to evaluate competency in completing this skill. Select Satisfactory (S) or Unsatisfactory (U) for each step and provide comments as needed.

*Document the relevant information (assessment findings, pharmacological and nonpharmacological interventions) in the client's medical record.

Step by Step

STEP	S	U	EVALUATOR'S COMMENTS
*Provide privacy as needed.			
*Introduce yourself to the client.			
*Verify client identification.			
*Determine whether the client has allergies.			
*Provide client education.			
Gather equipment.			
Verify prescription for blood transfusion.			

STEP	S U EVALUATOR'S COMMENTS
Verify that consent has been signed and that IV is patent prior to starting infusion. Blood can be out of refrigeration for a maximum of 4 hours.	
Perform hand hygiene and put on appropriate PPE as indicated.	
Prime Y-tubing with normal saline and spike blood bag.	
Verify blood product with another nurse.	
Obtain vital signs prior to administration.	
Start infusion slowly. Monitor for adverse reactions.	
After 15 minutes, obtain another set of vital signs according to policy.	
If reaction occurs, stop infusion and infuse NS.	
Slowly increase blood infusion rate to prescribed rate.	
Check vitals every hour then every 2 hours according to policy.	
When infusion has completed, flush and clamp IV.	

STEP	S U EVALUATOR'S COMMENTS
Obtain vital signs ½ hour after infusion has finished.	
Place used blood tubing and bag in appropriate disposal area.	
Remove gloves and perform hand hygiene.	
*Ensure that the client is in a safe position prior to leaving the room and has the call light within reach.	

References

Taylor, C., Lynn, P. and Bartlett, J. (2019). *Fundamentals of nursing* (9th ed.). Philadelphia: Wolters Kluwer.