

Nursing Practice Alert

GO LIVE Tuesday, February 15th, 2022

EMS Patient Transportation & Blood Product Administration:The Nurse's Role

Patients can NOW be transported between hospital sites with a continuing Blood Product Transfusion to expedite immediate transfer to the receiving unit and avoid delays. Patients that are *transported* between facilities by EMS *while receiving blood products* require special care to keep them safe! Here's how:

The role of the **Sending RN**:

- 1. When you receive an order to administer blood products to a patient that is being transferred to another facility don't delay! Start the transfusion according to hospital policy, including:
 - Patient identification
 - The 2-RN verification process

- Documentation in EPIC
- Patient monitoring, etc.
- 2. Before EMS arrives, obtain (1) the DOH 5209 form 'EMS Transfer Blood Transfusion Record' and (2) the DOH 5210 form 'EMS Transfer Blood Transfusion Physician Orders' from Patient Works. The Provider must complete the DOH 5210/Orders form for the blood being transfused and for any additional units that are being sent with the patient.

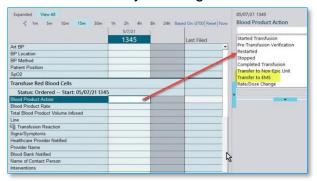
Bloo	od Trai	nsfusion Tra	nsfer Orders
	DOB		
	Date		
Receiving Hospital Name			
at		mL/hr	
		# Units	Rate (mL/hr)
	Receiving Hospital Name	DOB Date Receiving Hospital Name	Date Receiving Hospital NameatmL/hr

- 3. If the patient is being transported with additional units, obtain a cooler from the ED. EMS will pack the cooler with ice and collect the additional blood products from the unit RN.
- 4. When EMS arrives, give them handoff report and complete the *Pre-Transport Identification* section on the <u>DOH</u> <u>5209/Transfusion **Record** form with EMS</u>. List unit infusing as well as any additional units being sent with patient on this form. <u>All</u> units must be verified with EMS.

Patient Name (Print)			DO	В	
Patient ID			Da	te	
Transferring Hospital Nam	ie	Receiving H	ospital Name		
Products are packed inNumber and type of co	TTFICATION: ompared with ALL blood component a validated transport container, witi omponents agrees with physician's of d venous access line with only blood	th a pre-transfusion blood specir orders			
☐ Products are packed in ☐ Number and type of co ☐ Patient has a dedicated Hospital Staff (MD or RN):	ompared with ALL blood component a validated transport container, with omponents agrees with physician's o	th a pre-transfusion blood specir orders			
Products are packed in Number and type of co Patient has a dedicated Hospital Staff (MD or RN): EMT-CC/P:	ompared with ALL blood component a validated transport container, with mponents agrees with physician's of the venous access line with only blood PRINT NAME PRINT NAME	th a pre-transfusion blood specir orders	en if available		
Products are packed in Number and type of co Patient has a dedicated tospital Staff (MD or RN): EMT-CC/P: Ambulance Service:	ompared with ALL blood component a validated transport container, with imponents agrees with physician's of d venous access line with only blood PRINT NAME	th a pre-transfusion blood specin orders and/or 0.9% NaCl running	SIGNATURE		

4. Document the amount of blood infused in the I&O record.

5. Document that the transfusion continues during transport in the EPIC flowsheets under 'Blood Product Actions' by entering 'Transfer to EMS'

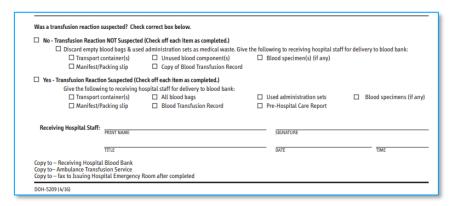




Print the Clinical Summary (located in the Transport tab) to go with EMS and the patient.
 Documentation of blood administration will be available in the clinical summary. There is NO need to send a downtime blood transfusion form with the patient.

The role of the **Receiving RN**:

1. When the patient arrives, get handoff from EMS and sign as the *Receiving Clinician* at the bottom of the DOH 5209/Transfusion **Record**.



- 2. Continue to monitor the patient, according to policy, during the remainder of the transfusion.
- Send any additional blood product units that were transported with the patient to the receiving blood bank.
 - Don't keep them on the unit!
 - Don't transfuse them!
 - If additional units need to be transfused, the blood bank at the *receiving* hospital must receive a type and screen and process the units before they can be given to the patient. Return cooler and thermometer to EMS for disinfection and drying. They will return it to the sending facility.
- 4. Document the transfusion, including the post-transfusion vital signs, on the blood transfusion *downtime* forms and in EPIC.
- 5. Make a copy of the both the <u>DOH 5209 & 5210 forms</u> and place them in the patient's chart. EMS will keep the originals and submit copies to the receiving blood bank.
- 6. Send the empty blood transfusion bag and tubing to the blood bank.

See Policy: MSHS 120A

PA issued January 2022 by MSHS Nursing Education