

Orders for Blood Transfusion & Blood Components

Referral Fax: 910.590.2013 Scheduler: 910.596.5417

Priority of Orders: ☐ Routine (within 24-48 hrs) ☐ Urgent (within 12-24 hrs.) ☐ Stat (Trauma, Surgery, Unexpected Event)
☐ Pre-op, Date of Surgery _____

**ANY BLOOD NOT USED WITHIN 48 HRS. AFTER X-MATCH IS
AUTOMATICALLY RELEASED UNLESS BLOOD BANK IS NOTIFIED**

Physician Orders/Outpatient Service Standing Orders attached: ☐

Blood Component: _____ **Diagnosis:** _____
NOTE: Indications Section must also be completed when ordering components.

Orders for Packed Cells also include: Patient Type and antibody screen or patient retype if T&S is current; Reflex testing to antibody ID and Patient and Unit antigen testing if indicated; Compatibility testing (i.e. crossmatch) for each unit.

to transfuse _____ ☐ Packed Red Blood Cells ☐ Autologous available
☐ Irradiated ☐ Leukocyte-Reduced ☐ Split Unit (Aliquots)
Infusion rate per hospital protocol or ☐ Infuse over ____ hours (cannot exceed 4 hours).

Orders for Fresh Frozen Plasma and Pheresed Platelets also include a patient type or patient retype

to transfuse _____ ☐ Fresh Frozen Plasma

to transfuse _____ ☐ Pheresed Platelets
☐ Irradiated ☐ Leukocyte – Reduced

Orders for RhIg include a patient type or retype and a Fetal Maternal Hemorrhage screen with reflex to Kleihauer Betke quantitative stain if screen is positive.

☐ Rh Immune Globulin (Rhlg) ☐ Other _____

INDICATION SECTION:

Packed Red Blood Cells (RBC)

Indications:

- ☐ 1. Hgb < 8g/dl or Hct < 24% Hgb _____
☐ Exception: Patients with coronary vascular disease, cerebral vascular disease, or chronic lung disease
- ☐ 2. Candidate for major surgery with Hgb < 10 g/dl or HCT < 30%.
Procedure _____
- ☐ 3. Signs/symptoms of anemia are present (syncope, tachycardia, shortness of breath, angina, fatigue on minimal exertion or there is a specified chronic anemia)
- ☐ 4. Active bleeding as evidenced by:
 - ☐ a. Systolic BP < 90 mmHg
 - ☐ b. Pulse > 110/min.
 - ☐ c. Estimated blood loss of 750 ml or >
 - ☐ d. Rapid blood loss with falling hemoglobin
- ☐ 5. Other _____

Medications:

- ☐ 1. Tylenol ☐ 500 mg, ☐ 650 mg, ☐ 1000 mg,
☐ PO, ☐ PR
☐ Prior to infusion ☐ Between 1st and 2nd unit
- ☐ 2. Benadryl ☐ 25mg, ☐ 50 mg
☐ PO ☐ IV
☐ Prior to infusion ☐ Between 1st and 2nd unit
- ☐ 3. Lasix ☐ 20 mg
☐ PO ☐ IV
☐ Prior to Infusion ☐ Between Each unit ☐ End of transfusion
- ☐ 4. Other _____

Physician Signature _____

Date _____

Fresh Frozen Plasma

Indications:

- ☐ 1. Coagulopathy documented by INR > 1.7 or APTT > 55 seconds in presence of :
 - ☐ a. Bleeding
 - ☐ b. Liver disease
 - ☐ c. Vitamin K deficiency
 - ☐ d. DIC
- ☐ 2. Coagulation factor deficiency
- ☐ 3. Correction of warfarin therapy when reversal by Vitamin K is not feasible due to time constraints
- ☐ 4. Thrombotic thrombocytopenia purpura
- ☐ 5. Ten or more units RBC's or whole blood given within 24 Hrs.
- ☐ 6. Other _____

Platelets

Indications:

- ☐ 1. Platelet Count $\leq 10,000 \text{ mm}^3$
- ☐ 2. Platelet Count $\leq 50,000 \text{ mm}^3$ in patient scheduled for invasive procedure within 12 hours.
- ☐ 3. Platelet count $\geq 10,000 \text{ mm}^3$ with active bleeding
- ☐ 4. Massive transfusion with documented thrombocytopenia and clinically abnormal bleeding.
- ☐ 5. Non functioning Plts due to medication
- ☐ 6. Other _____

RH Immune Globulin (Rhlg)

Indications:

- ☐ 1. Prophylaxis in Rh-negative mother during third trimester
- ☐ 2. Rh-negative post-partum mother with Rh-positive infant
- ☐ 3. Prophylaxis in Rh-negative woman after amniocentesis, abortion, ectopic pregnancy, antepartum hemorrhage, fetal death, and abdominal trauma regardless of fetal Rh.
- ☐ 4. In Rh-negative patient receiving Rh-positive cellular blood components.

Adopted Date:

Revised Date: 2/2012, 11/2014, 11/2015



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Scanned By _____