Transfusion Therapy Competency

Nurse:		Facility:			
Date:		Preceptor:			
	Skills Reviewed		Successful	Unsuccessfu	
1.	Verify physician/LIP order				
2.	Verify consent for transfusion has been obtained				
3.	Identify patient using appropriate identifiers				
4.	Explain procedure to patient/significant other				
5.	Instruct patient to alert the nurse to any ur experienced during or following the transfu				
6.	Obtain vital signs and assess lung sounds				
7.	Verify with second licensed nurse, patient identification by matching blood product label with bracelet				
8.	Perform hand hygiene				
9.	Assemble supplies and equipment on a clean work surface				
10.	Don gloves				
11.	Verify vascular access is present and patent				
12.	Close all clamps on blood administration set				
13.	Hang blood/blood product container and normal saline (if applicable) on IV pole				
14.	Remove protective cover from access port on blood/blood product, maintaining asepsis				
15.	Prime the appropriate blood administration saline				
16.	Using aseptic technique, insert spike on b set into blood/blood product container and				
17.	Vigorously cleanse needleless connector vair dry				
18.	Maintaining asepsis, attach flush syringe to connector. Aspirate the catheter to obtain				
19	Flush with prescribed flushing agent				

20.	Attach blood administration set to needleless connector				
21.	Secure blood administration set				
22.	Initiate transfusion per facility protocol for specific blood product type				
23.	Verify that the solution is infusing at the prescribed rate				
24.	. Follow all other procedures for intermittent infusions				
25.	Change needleless connector post infusion per procedure				
	Procedure Rating: □Successful	uccessful			
Student's Signature:					
Preceptor's Signature:		Date:			