



Red Cell Transfusion

Consider: Risks/Benefits/Alternatives

Affix in case-notes

Verify correct patient identity

Indications:

Haemoglobin.....g/L Amount:.....units/mLs

&

Associated factor(s): *please circle*

Patient: stable / unstable / transfusion dependent

Blood loss: rapid / ongoing / anticipated

Symptoms: dyspnoea / fatigue / dizziness / chest pain (adults)

Impaired reserve: cardiac / pulmonary / cerebrovascular

Altered O₂ requirements: tissue hypoxia / sepsis / anaesthesia

Other reasons: *state*.....

Informed Consent: please tick

MO name.....

Obtained & documented

Pager..... date.....

Unable to obtain - reason

Signature..... time.....

Document outcome of transfusion in case-notes: *desired effect achieved?*

IF IN DOUBT, ASK. More info - See **NBA Guidelines** - transfusion of stable adults:

www.anzsb.org.au or www.transfusion.com.au

BloodSafe-TP-L3-401 MO sticker version 1.1 05/12