

# Part B – pretransfusion checking observational audit

Blood Matters Audit 2025

OFFICIAL

## Instructions

Prior to commencing the audit, the auditor must understand the correct procedure for positive patient identification, pretransfusion checking and the definition of double independent checking. They should also know how this is described in their local blood administration policy and/or procedure.

We recommend that the auditor read the following sections in the [ANZSBT Guidelines for the administration of blood products 3rd edition \(revised 2024\)](https://anzsbt.org.au/wp-content/uploads/2024/02/Guidelines-for-the-Administration-of-Blood-Products-revised-Feb-2024.pdf) <<https://anzsbt.org.au/wp-content/uploads/2024/02/Guidelines-for-the-Administration-of-Blood-Products-revised-Feb-2024.pdf>>:

- definition of double independent checking, Glossary pg 51
- 6.9.1 Identification bands, pg 31
- 6.9.2 Pretransfusion checking procedure, pg 33

**Double independent checking: Clinicians individually and without requiring direct involvement of each other, check the prescription, patient and blood component/ product identification, and blood component/ product characteristics (including expiry, compatibility, and special requirements (if any)). This process must ensure that each clinician is individually satisfied that, and responsible for, the correct component/ product is transfused in the correct way to the correct patient. The clinicians must agree before the transfusion is commenced.**

It may also be helpful for the auditor to review the below resources:

- Video: [BloodSafe SA, A double independent check for Blood](https://vimeo.com/599951929/ee654d8e61) (5 minutes, 53 seconds) <<https://vimeo.com/599951929/ee654d8e61>>
- Video: [Patient identification and pretransfusion checking](https://vimeo.com/303045235) (4 minutes, 13 seconds) <<https://vimeo.com/303045235>>
- Poster: The Blood Matters, [Double independent pretransfusion check](https://www.health.vic.gov.au/sites/default/files/2025-02/double-independent-pretransfusion-check.pdf) <<https://www.health.vic.gov.au/sites/default/files/2025-02/double-independent-pretransfusion-check.pdf>>

Both staff members need to independently check each item to confirm each step is completed and each item is correct or takes corrective action if a discrepancy is found.

**Table 1: IMPORTANT Potential error and interventions required from the auditor**

| Action  | Intervention required   |
|---|---|
| At the completion of the pretransfusion check if double independent checking has not occurred.                | <ul style="list-style-type: none"> <li>• Explanation of double independent checking and all requirements provided</li> <li>• Staff members to undertake the check again but will not be reaudited.</li> </ul>   |
| The pretransfusion check is not undertaken at the patient's bedside   | <ul style="list-style-type: none"> <li>• Staff members asked to stop</li> <li>• Education provided about the necessity of undertaking the pretransfusion check at the patient's bedside</li> <li>• Staff members to undertake the check again from the beginning at the patient's bedside</li> <li>• Audit may continue at the patient's bedside</li> </ul> |
| A staff member attempts to spike the blood component pack prior to the completion of the pretransfusion check | <ul style="list-style-type: none"> <li>• Staff member asked to stop and advised that the blood component should not be spiked until the identity check of patient and blood component is complete.</li> <li>• Staff members to continue undertaking the check and audit can continue</li> </ul>   |
| One or more steps of the pretransfusion check were not completed  | <ul style="list-style-type: none"> <li>• Staff members to be advised of step/s that they missed.</li> <li>• Explanation of double independent checking and all requirements provided</li> <li>• Staff members to undertake the check again but will not be reaudited.</li> </ul>  |
| If an interruption occurs and the staff do not recommence the check from the beginning                        | <ul style="list-style-type: none"> <li>• Explain the need to complete the check as a continuous process and that safety is compromised when interruptions occur</li> <li>• Staff member to undertake checks from the beginning but will not be reaudited.</li> </ul>  |

When intervening the auditor should educate staff about the requirement for double independent checking and importance of completing each step of the pretransfusion check.

**Table 2 Audit questions: Patient demographics**

|  |                  |          |               |                 |
|--|------------------|----------|---------------|-----------------|
| Audit number   |                  |          |               |                 |
| Year of birth  |                  |          |               |                 |
| Sex  | Male             | Female   | Other         |                 |
| Clinical specialty                                     | Medical<br>Other | Surgical | Haem/oncology |                 |
| Blood component type                                   | RBC              | FFP      | Platelets     | Cryoprecipitate |
| Is an EMR used in the patient identification process?  | Yes              | No       |               |                 |
| Is the patient wearing an ID band?                     | Yes              | No       |               |                 |
| Is the patient conscious and competent?                | Yes              | No       |               |                 |
| Was the pretransfusion check commenced at the bedside? | Yes              | No       |               |                 |

**Table 3 Audit questions: Independent patient identification check**

| Independent patient identification check  | Person 1  | Person 2  | Check conducted                                      |
|---|-----------|-----------|--|
| Did each staff member ask the patient to state their full name?   | Yes<br>No | Yes<br>No | independently checked<br>shared checking<br>no check |
| Did each staff member ask the patient to spell their full name?   | Yes<br>No | Yes<br>No | independently checked<br>shared checking<br>no check |
| Did each staff member ask the patient to state their date of birth?   | Yes<br>No | Yes<br>No | independently checked<br>shared checking<br>no check |
| Were the patient ID details verified by each staff member on the patient's ID band?   | Yes<br>No | Yes<br>No | independently checked<br>shared checking<br>no check |
| Were the patient ID details verified by each staff member on the compatibility label attached to the blood component?       | Yes<br>No | Yes<br>No | independently checked<br>shared checking<br>no check |
| Were the patient ID details verified by each staff member on the blood prescription form or EMR with the prescription open? | Yes<br>No | Yes<br>No | independently checked<br>shared checking<br>no check |

**Table 4 Audit questions: ABO and RhD group check**

| <b>Independent ABO and RhD group check</b>  | <b>Person 1</b>  | <b>Person 2</b>  | <b>Check conducted</b>                                      |
|---|------------------|------------------|---|
| Was the blood group on the blood component checked for compatibility with the blood group of the patient as shown on the compatibility label attached to the blood component?   | Yes<br>No        | Yes<br>No        | independently checked<br>shared checking<br>no check        |
| If the blood group of the blood component and the patient are not identical, did the staff member check for a specific comment to indicate that it is compatible (or is the most suitable available) from the transfusion service provider? | Yes<br>No<br>n/a | Yes<br>No<br>n/a | independently checked<br>shared checking<br>no check<br>n/a |

**Table 5 Audit questions: Staff response to blood group discrepancy between patient and component**

| <b>Blood group discrepancy</b>  |
|---|
| If there was a discrepancy between the patient blood group and the component blood group and there was no comment regarding compatibility, what action(s) did the staff take? (Multiple responses permitted)  |
| Not applicable<br>Discussed by checking staff - both aware the component was compatible<br>Check stopped<br>Clarified by transfusion laboratory<br>Discussed with medical staff<br>Discussed with nurse in charge<br>Continued check with no discussion or acknowledgement of discrepancy |

**Table 6 Audit questions: Component details check**

| <b>Independent component details check</b>  | <b>Person 1</b>  | <b>Person 2</b>  | <b>Check conducted</b>                                      |
|---|------------------|------------------|---|
| Was the donation number on the compatibility label checked to the donation number on the blood component label from Lifeblood by each staff member? | Yes<br>No        | Yes<br>No        | independently checked<br>shared checking<br>no check        |
| Was the blood component checked for compliance with any special requirements (e.g. irradiated or CMV seronegative) on the prescription?             | Yes<br>No<br>n/a | Yes<br>No<br>n/a | independently checked<br>shared checking<br>no check<br>n/a |
| Was the crossmatch expiry date checked and the crossmatch confirmed as still valid? (RBC only)  | Yes<br>No<br>n/a | Yes<br>No<br>n/a | independently checked<br>shared checking<br>no check<br>n/a |
| Was the component expiry date and time checked and confirmed as still valid?  | Yes<br>No        | Yes<br>No        | independently checked<br>shared checking<br>no check        |
| Was the integrity of the component checked?   | Yes<br>No        | Yes<br>No        | independently checked<br>shared checking<br>no check        |

**Table 7 Audit questions: Other safety considerations**

|   |     |    |
|---|-----|----|
| Did a staff member attempt to spike the blood component prior to the completion of the checks?  | Yes | No |
| Were the staff members interrupted at any time during the process?  | Yes | No |
| Was the pretransfusion check stopped by the staff member/s due to discrepancies with patient identification details and those on the blood component? | Yes | No |
| Was the pretransfusion check stopped by auditor due to failure in process/actions outlined in table 1 in the audit instructions?                      | Yes | No |

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