



Physician Orders ADULT: Transfusion PRBCs Not Actively Bleeding Plan

Initiate Orders Phase

Admission/Transfer/Discharge

- Patient Status Initial Outpatient
T;N, Attending Physician: _____
Reason for Visit: _____
Bed Type: _____ Specific Unit: _____
Outpatient Status/Service OP-Ambulatory Surgery

Care Sets/Protocols/PowerPlans

- Initiate Powerplan Phase
Phase: Transfusion PRBCs Not Actively Bleeding Phase, When to Initiate: _____

Transfusion PRBCs, Not Actively Bleeding

Vital Signs

- Vital Signs
Monitor and Record T,P,R,BP, per Blood Transfusion policy

Patient Care

- INT Insert/Site Care
q4day
- PortACath Access
- Intake and Output
- R Consent Signed For
T;N, Procedure: Transfusion of Blood/Blood Products

Continuous Infusion

- Sodium Chloride 0.9%
250 mL, IV, Routine, (for 1 dose), 75 mL/hr

Medications

- acetaminophen
650 mg, Tab, PO, N/A, NOW, give prior to blood/blood product transfusion
- diphenhydrAMINE
25 mg, Cap, PO, N/A, PRN, Routine, give prior to blood/blood product transfusion
- diphenhydrAMINE
25 mg, Injection, IV Push, N/A, PRN, Routine, give IV if unable to take PO prior to blood/blood product transfusion
- methylPREDNISolone sodium succinate
40 mg, Injection, IV Push, N/A, PRN, Routine, give prior blood/blood product transfusion
- furosemide
_____mg, Injection, IV Push, N/A, Routine

Laboratory

- Type and Screen
 - Routine, T;N, Type: Blood (DEF)*
Comments: Good for 3 days of draw, best if done the day before needed. Blood bank uses the same fin # .
 - STAT, T;N, Type: Blood





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Before blood products can be transfused, place on TYPE and Crossmatch order below.(NOTE)*

- Crossmatch Units from Type and Screen
Routine, T;N, 1 units
- Type and Crossmatch PRBC
 - Routine, T;N, 1 units, Type: Blood (DEF)**
 - Routine, T;N, 2 units, Type: Blood*

-The minimal effective dose of all blood components should be used; SINGLE UNIT transfusions of red cells with repeat measurement of the H/H post-transfusion is recommended for patients that are not actively bleeding.-One unit of packed red cells in adults will increase hematocrit by approximately 3% and hemoglobin by 1g/dl.(NOTE)*

- Transfuse PRBC's - Not Actively Bleeding
 - Routine, T;N (DEF)**
 - Routine, T;N, Reason: Hgb <=7 g/dL or Hct <= 21%, Reason: Transfuse in Dialysis*
 - Routine, T;N, Reason: H/H <= 8/24 & Coronary Artery Disease*
 - Routine, T;N, Reason: H/H <= 8/24 & Postoperative*
 - Routine, T;N, Reason: H/H <= 8/24 w/chemo or radiation*
 - Routine, T;N, Reason: Sickle cell disease or thalassemia major*
 - Routine, T;N, Reason: H/H <= 9/27 & MI or unstable angina*
 - Routine, T;N, Reason: H/H <= 8/24 & ER or Outpatient*
 - Routine, T;N, Reason: Other(Specify in Special Instructions)*

- H&H
Routine, T+1;0400, once, Type: Blood

Date	Time	Physician's Signature	MD Number
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***Report Legend:**
 DEF - This order sentence is the default for the selected order
 GOAL - This component is a goal
 IND - This component is an indicator
 INT - This component is an intervention
 IVS - This component is an IV Set
 NOTE - This component is a note
 Rx - This component is a prescription
 SUB - This component is a sub phase, see separate sheet
 R-Required order

