



▶ The Eight Rights of Transfusion Administration

Physicians and nurses work collaboratively to ensure continuous quality and safe transfusion practice. Each and every time we contemplate a transfusion for any patient, stop to consider, not only the risks and benefits, but also the “Eight Rights.” We need to be able to complete each and every one before transfusion.

1. Right Patient

- ▶ Match the recipient's name on the order with the name on the patient's wristband.
- ▶ Use two identifiers and when possible have the patient say his/her name and date-of-birth out loud.

2. Right Product

- ▶ Is the appropriate product being utilized for the clinical presentation?
- ▶ Does the type of product identified on the label match the product ordered?

3. Right Dose

- ▶ What is the patient's fluid volume status? Is the patient at risk for Transfusion Associated Circulatory Overload (TACO)?
- ▶ Are two units of PRBC's ordered for an anemic patient when one will do?

4. Right Route

- ▶ Confirm the patient has a patent IV and that only

Normal Saline is given through the IV that the blood product is administered through.

5. Right Time

- ▶ The product should be started as soon as possible after receiving on the unit, at least within 30 minutes from time dispensed from blood bank and completed within 4 hours.
- ▶ Is the product being given within the timeframe to maximize therapeutic effect?

6. Right Documentation

- ▶ Physician documentation of an appropriate indication.
- ▶ Transfusion consent documented prior to product administration.
- ▶ Document the dual identification process.
- ▶ Document vital signs before start, 15 minutes after start, every 30 minutes during transfusion, and at stop time.
- ▶ Document start and stop times

- ▶ Document any changes in patient condition as noted by the nursing and physician assessment.

7. Right Reason

- ▶ What is the physician's clinical indication for the transfusion (not just the lab result)?
- ▶ What clinical sign in addition to a lab value supports the transfusion indication?

8. Right Response

- ▶ Based on the indication for the transfusion, did the transfusion have the desired clinical effect, e.g. oxygen carrying capacity, reduced bleeding, and lab evidence?

Source:

1. *Nursing Drug Handbook, 2012, Lippincott Williams & Wilkins: Philadelphia, PA*
2. *The 8 Rights of Transfusion Administration, October 2012, The Bleeding Edge, Strategic Healthcare Group.*



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