

	<b>05-1002</b>	<b>Continuation of Blood Products</b>
Nor-Cal EMS Policy & Procedure Manual	ALS/BLS Protocols	
Effective Date: 05/01/2021	Next Revision: 05/01/2024	
Approval: Jeffrey Kepple MD – MEDICAL DIRECTOR	SIGNATURE ON FILE	

## Authority

Health and Safety Code Division 2.5, California Code of Regulations, Title 22, Division 9.

Signed transfer order from the transferring physician must provide for maintaining a specified infusion rate via blood delivery/warming devices that the Paramedic is trained and comfortable operating

### Prior to transport confirm:

The Blood products shall be started prior to transport  
The '5 rights' of medication administration  
Verify infusion rate and time remaining

Patient shall have a second IV established prior to transport

### Required during transport:

Continuous ECG, SPO<sub>2</sub>, required with vital signs being obtained at a minimum of every 15 minutes including temperature throughout duration of transfusion

**Do NOT mix any of the following with blood products (Give in a separate IV site):**

Dextrose 5%  
Lactated Ringers  
Medications

If Paramedic feels that level of care is out of his/her ability to safely transport, they may refuse transfer.

### Any major patient condition change or fever:

Transfusion should be immediately stopped  
Physician consultation ASAP

Blood product concerns:

### Hemolytic reaction:

Transfusion should be immediately stopped  
Disconnect Blood products / Flush IV site  
Consider a 500cc Fluid bolus  
Physician consultation ASAP

### Allergic reactions:

Transfusion should be immediately stopped  
Allergic Reaction/Anaphylaxis protocol  
Physician consultation ASAP

**Hyperkalemia, Hypocalcemia:** can occur during transfusions-with varying signs/symptoms such as sudden arrhythmias, hypotension.

Physician Consultation with 12 lead ECG as able  
Consider 1 gram of Calcium SIVP over no less than 5 minutes

### Transfusion-associated circulatory overload (TACO)

Is a risk with this in mind- Lung sounds, Vital signs and monitoring for edema throughout is required.

Discontinue Blood/Fluids and make Physician consultation ASAP

If infusion finishes normally during transport- save infusion bag, and revert to TKO or previously ordered fluid infusion rate.