

### Affix label or write patient details

Forename:

Surname:

Gender:

Date of birth:

CHI:

Patient body weight:

☐ Tick here if using this form for **major haemorrhage**

If patient **able** to consent, use NTR main form

If patient **unable** to consent, use this NTR short form and ensure;

**1.** Check for advance directive (refusal of transfusion)

**2.** Retrospective discussion with patient once capacity regained and document in health care record.

☐ Tick here if using this form for a **regularly transfused** patient, or if **further components** are required during single admission/episode: ensure NTR main form, incorporating documentation of informed consent, is in place and remains valid.

### Authorisation

### Pause and check → consent | TACO risk | clinical condition

If requirement to renew consent, use a new NTR Main Form

Have TACO risk factors been identified?

Yes ☐

No ☐

Scan QR code and document in clinical notes

Identified TACO risk factors:

Blood component:

Complete and attach pink sticker from blood component tag

Unit or mls:

Consider single unit transfusion  
for all non-bleeding patients

Duration:

Date:

Please state any special requirements or instructions below (inform patient of rationale):

Authoriser's name (print):

Authoriser's signature:

### Safety checklist – must be completed by staff administering the blood component

Bedside verbal ID check and ensure matches patient ID band

Yes ☐

Patient unable to verbalise ☐

Does the name, date of birth and patient ID number on patient's ID band MATCH EXACTLY with the details on blood component tag?

Yes ☐

If not, DO NOT TRANSFUSE, call the laboratory

Inspect the bag

Details match blood component tag ☐

Expiry date ☐

Condition ☐

Complete blue traceability tag once transfusion commenced and send to laboratory

Yes ☐

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Condition ☐

Complete blue traceability tag once transfusion commenced and send to laboratory

Yes ☐

# National Transfusion Record - Short Form

## AFFIX LABEL OR WRITE PATIENT DETAILS

Forename:

Surname:

Gender:

Date of birth:

CHI:



Scan the QR code for dosage guidance and further transfusion information

<https://tinyurl.com/NTRResource>

## Authorisation Pause and check → consent | TACO risk | clinical condition

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Have TACO risk factors been identified? Yes ☐ No ☐ Scan QR code and document in clinical notes

Identified TACO risk factors:

Blood component:

Complete and attach pink sticker from blood component tag

Unit or mls:

Duration:

Date:

Consider single unit transfusion for all non-bleeding patients

Please state any special requirements or instructions below (inform patient of rationale):

Authoriser's name (print):

Authoriser's signature:

## Safety checklist – must be completed by staff administering the blood component

Bedside verbal ID check and ensure matches patient ID band Yes ☐ Patient unable to verbalise ☐

Does the name, date of birth and patient ID number on patient's ID band MATCH EXACTLY with the details on blood component tag? Yes ☐ If not, DO NOT TRANSFUSE, call the laboratory

Inspect the bag Details match blood component tag ☐ Expiry date ☐ Condition ☐

Complete blue traceability tag once transfusion commenced and send to laboratory Yes ☐

## Authorisation Pause and check → consent | TACO risk | clinical condition

If requirement to renew consent, use a new NTR Main Form

Have TACO risk factors been identified? Yes ☐ No ☐ Scan QR code and document in clinical notes

Identified TACO risk factors:

Blood component:

Complete and attach pink sticker from blood component tag

Unit or mls:

Duration:

Date:

Consider single unit transfusion for all non-bleeding patients

Please state any special requirements or instructions below (inform patient of rationale):

Authoriser's name (print):

Authoriser's signature:

## Safety checklist – must be completed by staff administering the blood component

Bedside verbal ID check and ensure matches patient ID band Yes ☐ Patient unable to verbalise ☐

Does the name, date of birth and patient ID number on patient's ID band MATCH EXACTLY with the details on blood component tag? Yes ☐ If not, DO NOT TRANSFUSE, call the laboratory

Inspect the bag Details match blood component tag ☐ Expiry date ☐ Condition ☐

Complete blue traceability tag once transfusion commenced and send to laboratory Yes ☐