SFHPCS22 - SQA Code HD11 04

Operate and monitor equipment for processing intra-operative salvaged blood and complete salvaged blood processing

Overview

This National Occupational Standard is about operating processing equipment, monitoring the equipment during salvaged blood processing and completing the salvaged blood process. Users of this National Occupational Standard will need to ensure that practice reflects up to date information and policies.

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Performance criteria

You must be able to:

- P1 apply standard precautions for infection control and other necessary health and safety measures
- P2 confirm decision to process salvaged blood with the relevant member of staff
- P3 use intravenous normal saline 0.9% as the wash fluid as recommended by the manufacturer
- P4 monitor the progress of the processing procedure and report any problems to the appropriate member of staff
- P5 correctly record the volume of processed salvaged cells for re-infusion
- P6 report completion of the processing procedure to the relevant member of staff
- P7 clearly label salvaged blood re-infusion bags with patient's name, hospital number, date of birth, 'use by' time and the volume of salvaged cells
- P8 keep the processed blood with the patient
- P9 clear and dispose of waste as appropriate in accordance with local guidelines
- P10 complete and sign all relevant documentation

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Knowledge and understanding

You need to know and understand:

K1 the current European and National legislation, national guidelines, organisational policies and protocols in accordance with Clinical/Corporate Governance which affect your work practice in relation to operating and monitoring equipment for processing salvaged blood and completing salvaged blood processing

K2 your responsibilities and accountability in relation to the current European and National legislation, national guidelines and local policies and protocols, code of conduct and Clinical/Corporate Governance

K3 the importance of working within your own sphere of competence and limits of personal responsibility and accountability in relation to operating and monitoring equipment for processing and completing salvaged blood processing

K4 infection prevention and control in the processing of salvaged blood and potential consequences of poor practice

K5 the rationale behind the use of autologous blood transfusion

K6 the indications and contraindications for the use of intra-operative cell salvage

K7 the applications of intra-operative cell salvage in relation to patients who refuse allogeneic blood on religious or other grounds

K8 the role of the individual in operating and monitoring equipment for processing salvaged blood, completing salvaged blood processing and how this relates to other members of the theatre team

K9 the components of whole blood and the basis of centrifugal separation

K10 the functions of red cells in the delivery of oxygen to body tissues

K11 the differences between salvaged red cells and whole blood

K12 factors to be considered in the decision to proceed with processing the reservoir contents

K13 the types, purpose and function of intra-operative cell salvage machines within your work area

K14 the rationale behind the choices of machine programme for intra-operative cell salvage machines in use in the work area

K15 the purpose of the collection equipment and processing equipment

K16 the dangers of re-using equipment designed for single use only

K17 the effects of citrate or heparin anticoagulant on salvaged blood and the importance of documenting the amount of anticoagulant used

K18 the possible contents of the collection reservoir during surgery, including potential contaminants

K19 the choice of intravenous normal saline 0.9% as the wash fluid

K20 the importance of using an appropriate wash volume

K21 the advantages and risks of swab washing

K22 the process of salvaging blood from swabs

K23 the rationale for weighing all swabs during intra-operative cell salvage
K24 how to estimate blood loss during intra-operative cell salvage
K25 the potential composition of the contents of the re-infusion bag
K26 how the re-infusion bag should be labelled
K27 the rationale for and calculation of expiry time of the salvaged blood
K28 the types of filters used when re-infusing intra-operative cell salvage blood and the potential limitations
K29 the importance of recording all information, clearly and precisely in the appropriate documentation
K30 the principles and methods of waste disposal related to the equipment
K31 how to recognise hazards, errors and malfunctions of equipment and the appropriate action to take
K32 the importance of immediately reporting any issues which are outside your own sphere of competence without delay to the relevant member of staff

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Additional Information

External links

This National Occupational Standard links with the following dimension within the NHS Knowledge and Skills Framework (October 2004):

TBC

The candidate and assessor must only sign below when all Performance Criteria and Knowledge points have been met.

Unit assessed as being complete

Candidate's Name:	
Candidate's Signature:	
Date submitted to assessor as complete:	

Assessor's Name:	
Assessor's Signature:	
Date assessed as complete:	

Internal Verification —

to be completed in accordance with centre's IV strategy

Evidence for this Unit was sampled on the following date/s:	**IV's Signature**	**IV's Name**

This Unit has been subject to an admin check in keeping with the centre's IV strategy.

Date of admin check	**IV's Signature**	**IV's Name**

Unit completion confirmed

IV's Name:	
IV's Signature:	
Date complete:	