Organisation name Site or unit		POLICY **Issue of blood against a valid request**	
Document ID	BLD-POL-002	**Version**	1.0
Status	Blank form, to adapt	**Issue date**	
Review date		**Replaces**	
Owner		**Approved by**	
Signature			

Standards › Standard 5 › Policies

Policy · BLD-POL-002 · Version 1.0 · Approved by the ASF Expert Committee

Supports: 5.5

At a glance

- Blood is issued only against a valid, signed request.
- The patient's identity and the request are checked before issue.
- Compatibility is checked and recorded before issue.
- Every issue is recorded with its time and the person who received it.
- Stop and get help straight away if: blood is issued with no valid request, or to a patient whose identity has not been checked.

1. Purpose

To make sure blood goes only to the right patient, against a valid request (5.5).

2. Scope

Applies to	Clinical and support staff in the hospital
Locations	All wards, clinics and departments of the facility

When	Whenever the activity described is carried out
Does not apply to	Activities covered by another document listed in section 15

3. Definitions

Term	Meaning
Clinical lead	The doctor or nurse in charge of the area at the time

4. Background

Blood given to the wrong patient can kill. A valid request, a compatibility check and a recorded issue make the chain of checks visible at each step.

5. Responsibilities

Role	Responsibility	Competence
Blood bank director	Owns the issue rule	Clinician
Blood bank technician	Checks request and issues	Technician

6. Materials and equipment

Item	Requirement	Condition
Records and forms named in this document	Current version	Checked before use

7. Safety

- Stop and call for help if a patient is at immediate risk. Do not delay urgent care to complete paperwork.

8. Before you start

- Confirm the forms and equipment named in this document are available and current.

9. Procedure

Step 1. Request.

- Check the request is valid, signed and has the patient's identity (BLD-FRM-002).

Key point: No request, no issue.

Step 2. Compatibility.

- Complete the compatibility check and record it before issue.

Key point: Checked before issue.

Step 3. Issue.

- Issue the unit, record the time and the person who received it, and complete the bedside check at the ward (HOS-FRM-007).

Key point: Two checks, two records.

10. Decision points

- No decision points in this procedure.

11. Special situations

Situation	Action
Out of hours	Follow the same steps. Use the on-call contact on the wall of the area.

12. Escalation

- Any serious problem goes to the duty clinical lead at once and to the clinical director the same day.

13. Monitoring

Measure	Target	Frequency	Owner	If not met
Issues against a valid request	100%	Monthly	Blood bank director	Escalate to governing body
Issues with compatibility recorded	100%	Monthly	Blood bank director	Escalate to governing body

14. Records

Record	Kept in	Retention
Record named in this document	Patient record or the area file	the period set by the facility's records policy, in years

15. Training

- Staff are trained in this document at induction and refreshed each year, with a recorded competency check.

16. Related documents

ID	Title	Use
BLD-FRM-002	Blood request and issue record	Record
HOS-SOP-008	Blood transfusion	Procedure

17. Evidence

Reference	Note
E-009	Based on the Council of Europe Guide to the Preparation, Use and Quality Assurance of Blood Components.
E-006	ASF Policy Framework v1.2. Adapted.
E-009	ASF Expert Committee consensus.

18. Change history

Version	Date	What changed	Approval
1.0	the date of approval	First version	set Expert Committee approval

19. References

Accréditation Sans Frontières (2026). ASF Policy Framework v1.2. (E-006)

Accréditation Sans Frontières (2026). ASF Expert Committee consensus on Standard 1. (E-009)

Download this document as PDF