How to Complete the Transfusion Reaction Report Form

1. **Pt and blood product checks are identical:** YES or NO

   - **T6, T7, T8 (inpatient) as a Med/Surg ward**

   - **T8 outpatient clinic, MDU & Renal Unit are Outpatient**

2. **Information that the TML & pathologist need for investigation of the**

   - **Category from standardized list e.g. Medical or Obstetrics**

3. **Highest temp is needed for definition of fever**

4. **Temp route is needed**

   - **Tick all S&S that apply**

5a. **Blood product e.g. Platelets or IVIg**

   - **Record volume transfused if known estimate if volume is not known**

5b. **Filters or Equipment Used:** tick all that apply

6a. **Treatment measure taken:** Click all measures that apply. Use “Other” to enter additional information.

6b: Please sign as well as print name. A print name improves identification of the contact person if follow up is required.