

The A-E Decision Tree to facilitate decision making in transfusion



Assess patient
Any avoidable blood loss
(frequent, unnecessary tests/interventions)



Blood results (all) reviewed including trends – valid and reliable?
Best treatment option—is transfusion the best treatment option? If yes, what components needed, how many, what order and any specific requirements needed?



Consent/communication (adequate patient information—both verbal and written)
to patients and where appropriate to families and carers
Correctable factors to be addressed like bleeding, haematinic deficiency



Do not forget other measures (vitamin K, tranexamic acid, cell salvage, etc)
Do not hesitate to question colleagues regarding decisions made and ask for rationale
Do not forget to document in patient's notes and in discharge summaries



Ensure timely communications to laboratory- need to be clear, concise and accurate
Ensure all relevant transfusion checklists including TACO risk assessment and actions arising thereafter have been completed
Evidence based decisions made weighing risks, benefits and options available
Ensure patient receives adequate post-transfusion information if transfusion given as a day case