

Type of Rxn	Onset	Signs and Symptoms	Nursing Interventions
acute hemolytic (mild or deadly)	immediate	chills, fever, <u>low back pain</u> , tachycardia, flushing, hypotension, chest tightening or pain, tachypnea, <u>nausea</u> , anxiety, <u>hemoglobinuria</u> .	-stop the transfusion immediately -notify MD -stay with pt
febrile	30 mins to 6 hours post transfusion	chills, fever, flushing, <u>headache</u> , anxiety	-stop the transfusion immediately -administer antipyretics -prevention: use a white blood filter
mild allergic	during, or up to 24 hrs post	<u>itching</u> , <u>urticaria</u> , flushing	-stop the transfusion immediately -administer antihistamines (Benadryl)
anaphylactic	immediate	<u>wheezing</u> , dyspnea, chest tightness, <u>cyanosis</u> , hypotension	-stop the transfusion immediately -notify MD -maintain airway -administer O2, IV fluids, antihistamines, corticosteroids, vasopressors
circulatory overload	during transfusion	dyspnea, chest tightness, tachycardia, tachypnea, headache, <u>hypertension</u> , <u>JVD</u> , <u>peripheral edema</u> , <u>orthopnea</u> , sudden anxiety, <u>crackles in bases</u>	-slow the infusion rate -administer O2 and diuretics as ordered -monitor VS and notify MD
sepsis/septic shock	after transfusion	fever, nausea, vomiting, abdominal pain, chills, hypotension	-maintain patent airway -administer O2, abx, vasopressors (late) -obtain samples for blood cultures -elevate pts feet
DIC	after transfusion	this is a complication of sepsis/septic shock	-administer anticoagulants in early phase -administer clotting factors and blood products in late phase -administer activated protein C to control inflammatory response

Underlined = distinguishing characteristic(s)

Series, C. M. (2008). Adult Medical-Surgical Nursing PN Edition 7.1 - Contemporary Master Series Review Module. Kansas City: Assessment Technologies Institute.