Questionnaire

Emergency issue of 'Group O' and 'O Rh D Negative' red cell units

NICE 2018 Launceston

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Thank you NICE & VIDG - 37 survey responses







Australian Standards and Guidelines



1st Edition, November 2016

GUIDELINES FOR TRANSFUSION AND IMMUNOHAEMATOLOGY LABORATORY PRACTICE



NATIONAL PATHOLOGY ACCREDITATION ADVISORY COUNCIL

REQUIREMENTS FOR TRANSFUSION LABORATORY PRACTICE

(Third Edition 2017)





Standard 7 Blood and Blood Products

NPAAC: Requirements for Transfusion Laboratory Practice 3rd ED 2017

- S11.2 Red cells must not be issued in emergency situations on the basis of a historical blood group.
- C11.2(i) if blood components are required before transfusion testing can be undertaken, the red cells **must** be group O. If the patient is a female of child bearing potential, red cells **should** be RhD negative whenever possible.
- C11.2(iii) RhD positive red cells and platelets should not be given to RhD negative females of child bearing potential, except in life threatening circumstances.
- S11.5 The laboratory must have criteria for the issue of RhD positive red cells and platelets when RhD negative stocks of these components are limited.

ANZSBT Guidelines for Transfusion and Immunohaematology Laboratory Practice 1st ED 2016

Very similar wording with additional notes

4.3.4: K negative red cells are clinically indicated for women who are unable to be K typed before urgent transfusion.

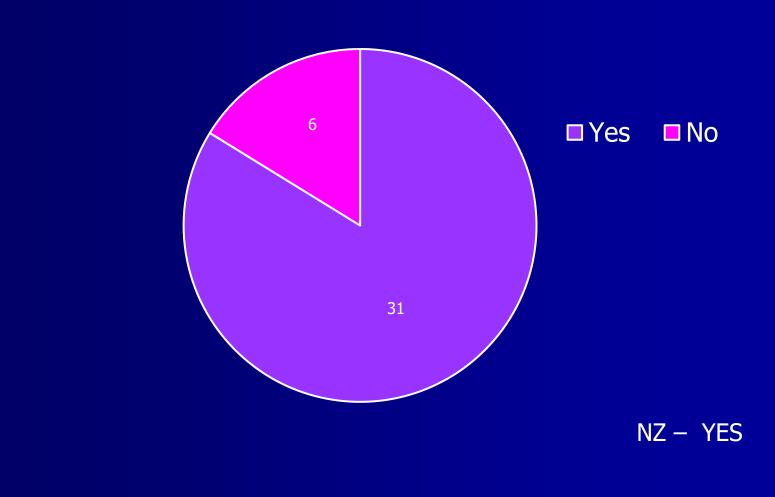
NSQHS Standard 7: Blood and Blood Products

Highlights the requirement to document all transfusion details for future lookback requests

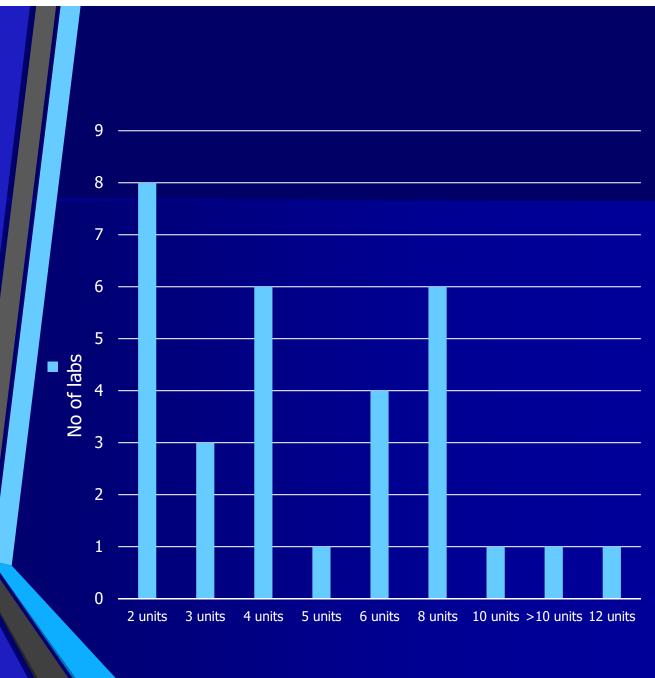
1. Does your laboratory have prepared Emergency Group O Positive units ready for issue?



2. Does your laboratory have prepared Emergency O Rh D Negative units ready for issue?

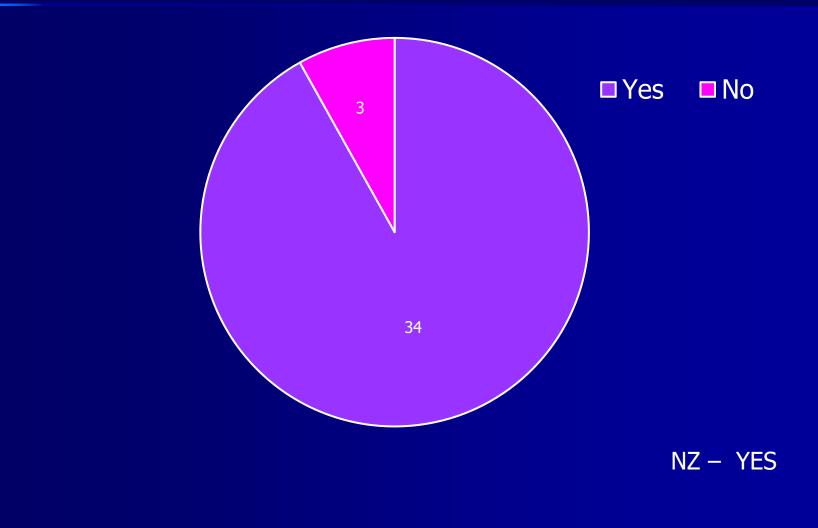


Number of Emergency units prepared

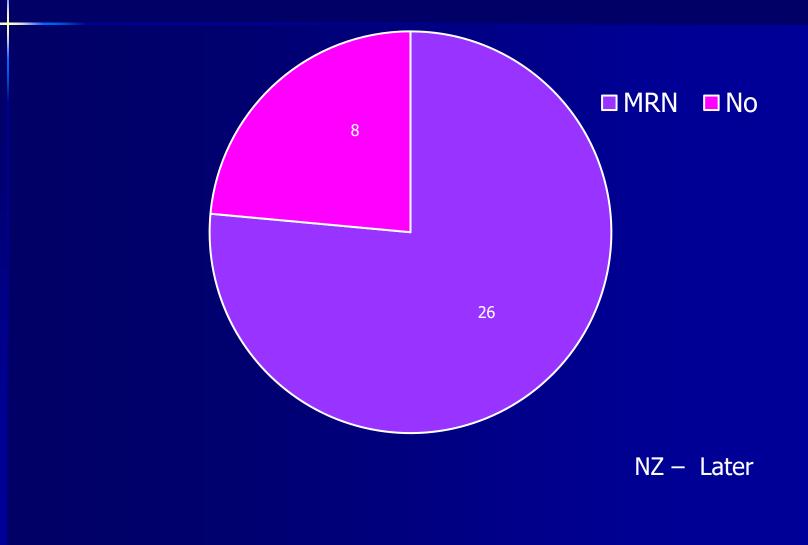


NZ – 6

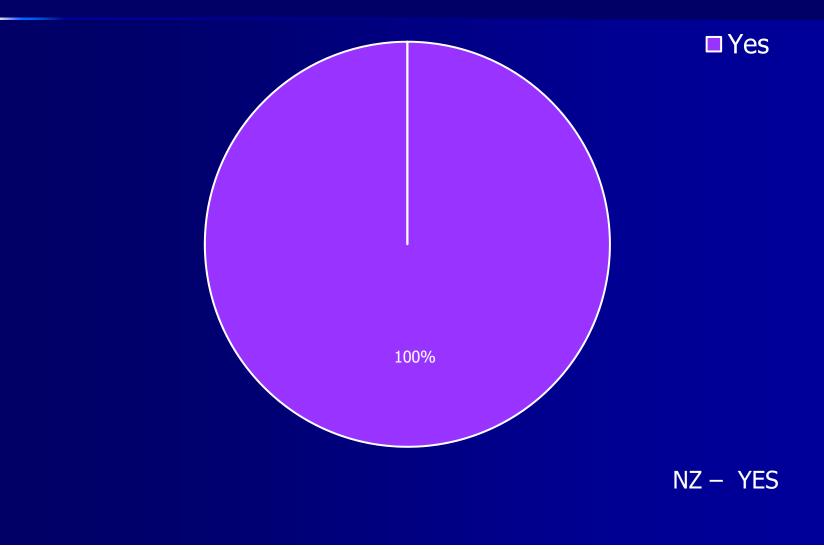
3. Does your laboratory information system allow computer issue of Emergency Group O and O Rh D Negative units?



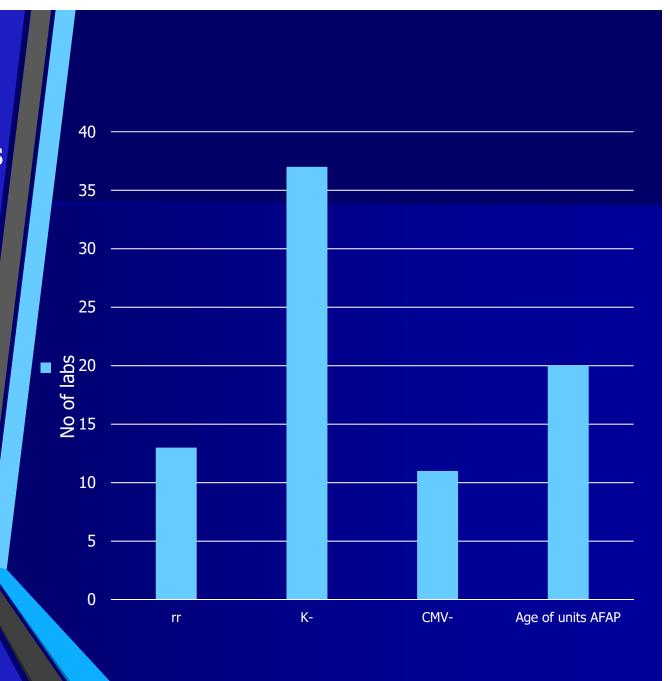
If YES, are units allocated to the patient Medical Record Number?



4. Does your laboratory have a manual procedure for Emergency issue, eg computer downtime

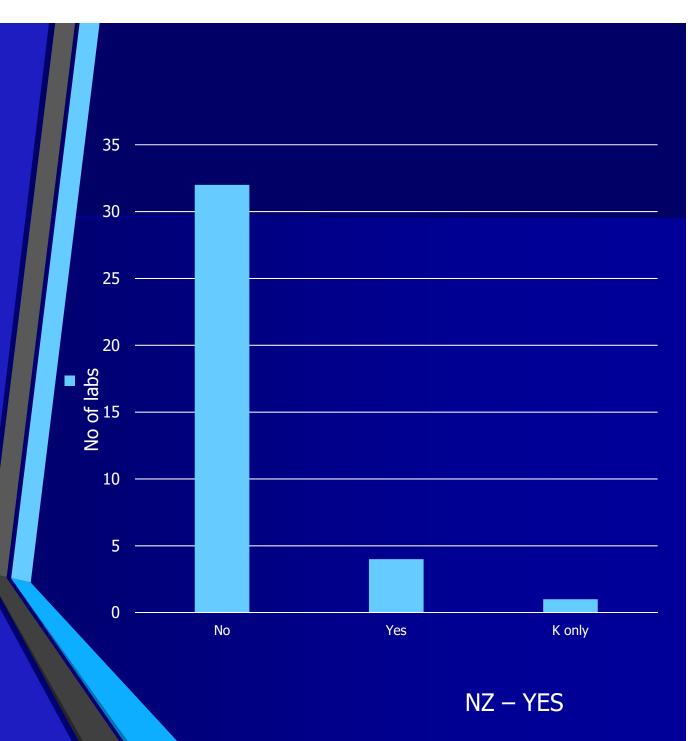


5. Requirements for O Rh D Negative units selected for Emergency issue

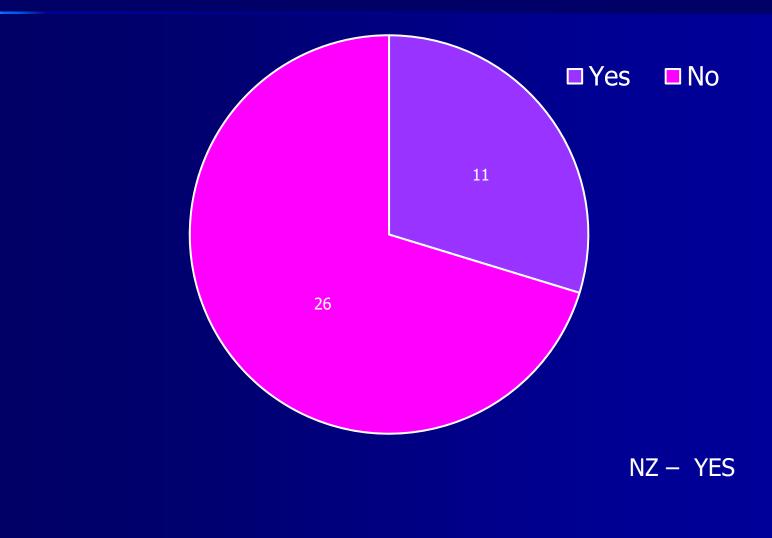


NZ D-, K-, DAT-

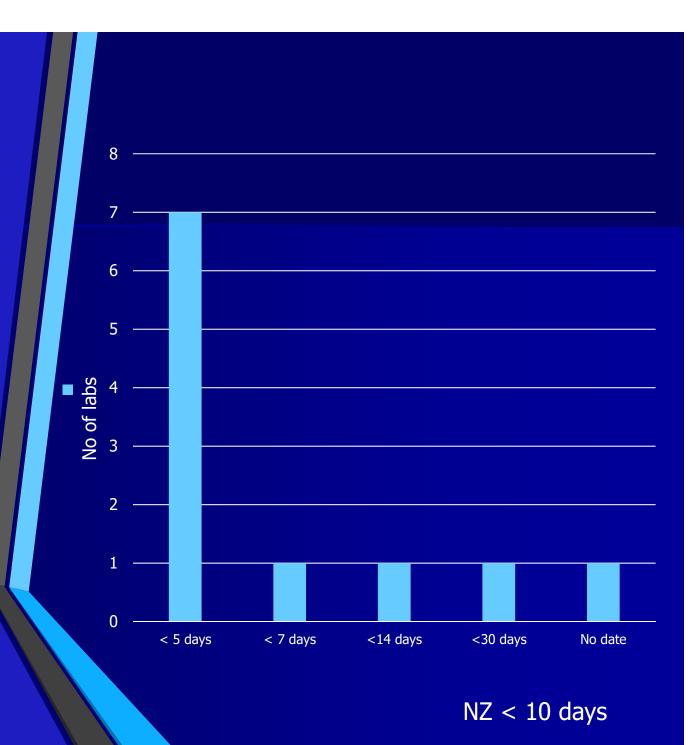




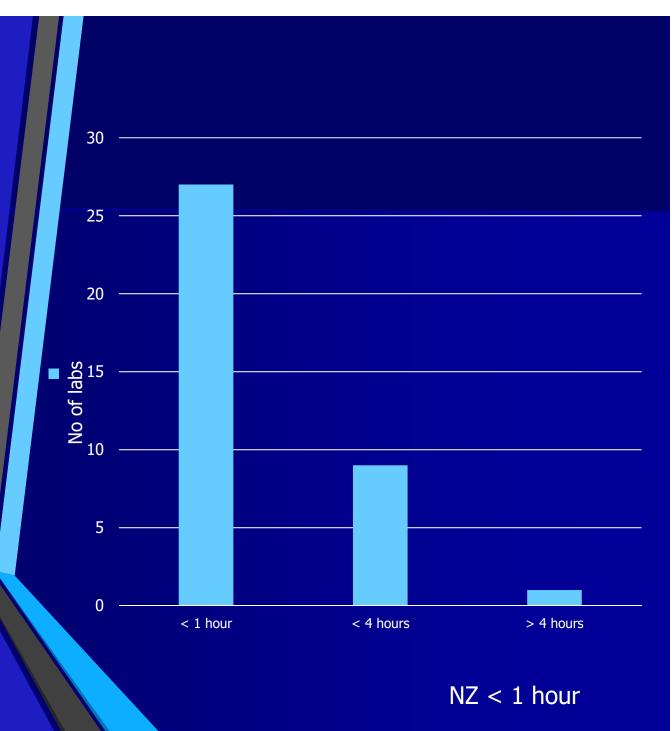
6. Availability of specific Emergency O Rh D Negative units for neonates



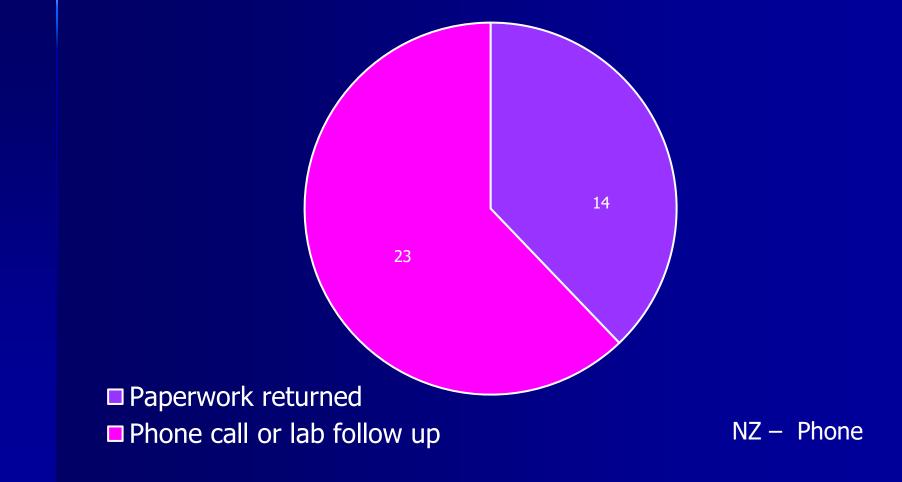
Age of units prepared for neonates



7. Replacement time for Emergency Group O units



8. Procedure for notifying the laboratory of the transfusion of Emergency Group O units

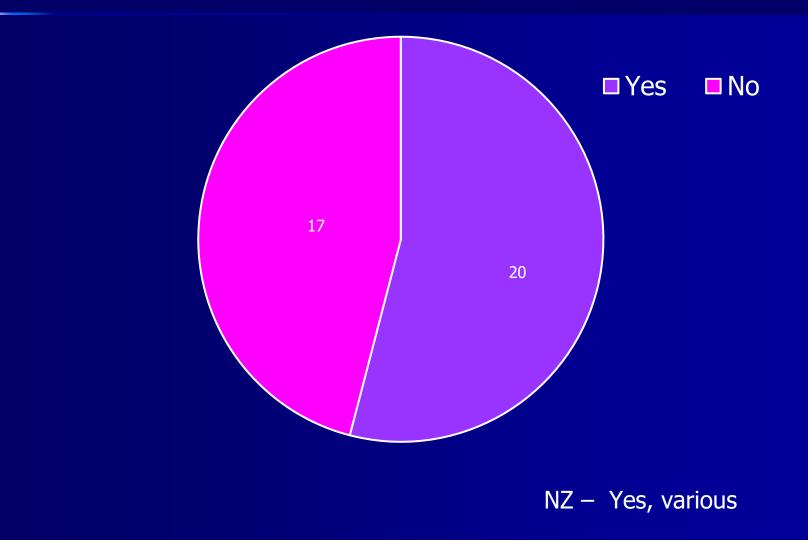


9. Monitoring of fridges storing Emergency Group O units

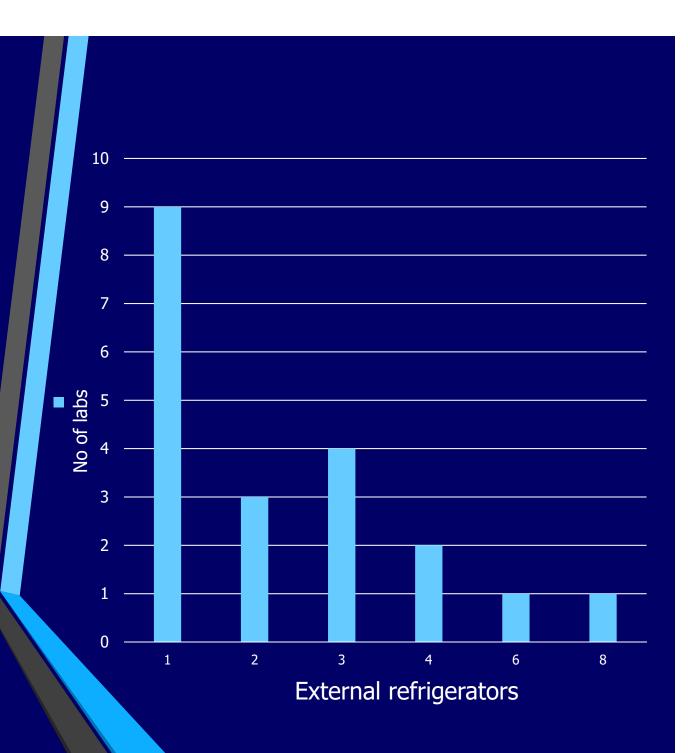
34 ■ Totally by laboratory Hospitals - offsite fridges

NZ – Lab and external

10. Laboratory provision of Emergency Group O units to external fridges



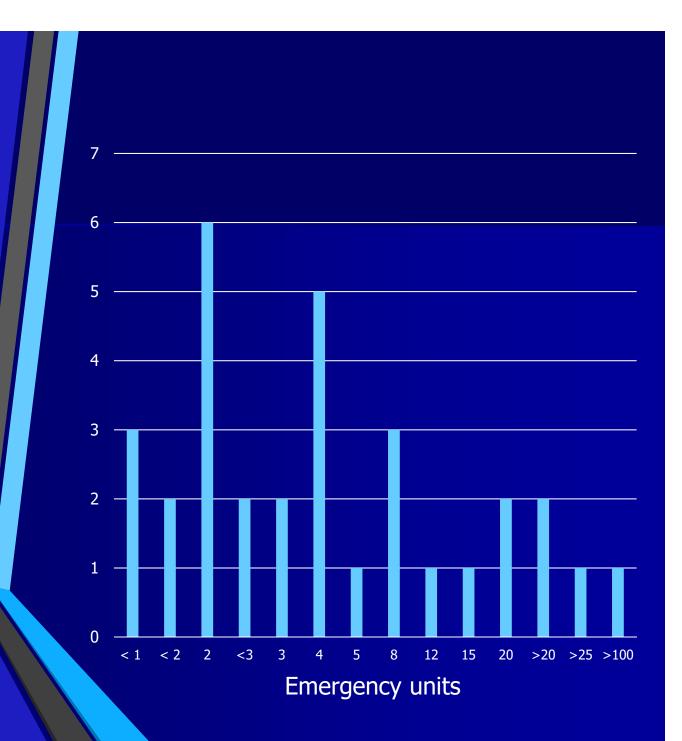
Number of refrigerators external to laboratory



Supplementary questions



Number of emergency units per laboratory actually used by patients each month



In the last year, has there been any unexpected red cell incompatibilities with emergency issue of blood?

- A few Anti-E and Anti-K antibodies that were compatible with the selected rr, K- units.
- One Anti-S given S+ unit with no reactions on follow-up.
- One Anti-c with no overt adverse outcome.
- Two patients had unexpected antibodies of no clinical significance
- NO ADVERSE OUTCOMES DISCUSSED

References

- National Pathology Accreditation Advisory Council (NPAAC). *Requirements for Transfusion Laboratory Practice*. 3rd Edition. Australian Government Department of Health 2017.
- Australian and New Zealand Society of Blood Transfusion (ANZSBT). *Guidelines for Transfusion and Immunohaematology laboratory Practice*. ANZSBT 1st Edition. November 2016.
- Australian Commission on Safety and Quality in Health Care (ACSQHC). National safety and quality health service standards. *Standard 7 Blood and Blood Products*. 2nd ED. ACSQHC 2017

Thank you



