

Document Detail

	PMF IBTS SPEC IBTS/PMF/SPEC/0227[5]
Title:	LEUCOCYTES POOLED, RED CELL REDUCED,
	IRRADIATED, (SOURCE OF GRANULOCYTES)
Owner:	QA DOC CON QA DOC CONTROL
Status	CURRENT
Effective Date:	31-Mar-2025
Expiration Date:	31-Mar-2027

<u>Review</u>

Review: IBTS PMF REVIEW

Level	Owner Role	Actor	<u>Sign-off By</u>
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4	QUALITY ASSURANCE REVIEWER IBTS	COLIN JOHNS	COLIN JOHNS

Change Orders

Changes as described on Change Order: <u>Change Order No.</u>

Change Orders - Incorporated

Changes as described on Change Order:

Change Order No. IBTS/CO/0033/25

IRISH BLOOD TRANSFUSION SERVICE PRODUCT MASTER FILE

TITLE: LEUCOCYTES POOLED, RED CELL REDUCED, IRRADIATED, (SOURCE OF **GRANULOCYTES**)

Change Description:

- 1. In" Pathogen Transmission" section: Change remove the word "leucodepleted" in the following sentence: "The risk of CMV transmission is minimal as the components are leucodepleted"
- 2. In" Pathogen Transmission" section: Change add word "CMV-"to the following sentence: "The risk of CMV transmission is minimal as the components are CMV-"
- 3. In "Pathogen Transmission" section: Remove: "reduced but not eliminated by bacterial screening" from sentence: "Sepsis due to bacterial contamination (reduced but not eliminated by bacterial Jse. screening)"

Reason for Change:

- 1. Leucodepleted" is not correct.
- 2. Only CMV components are used.
- 3. Bacterial screening not performed.

Change order No.:

IBTS/CO/0033/25

Referenced Documents N/A

SmartSolve Roles N/A

Training Type

N/A

SmartSolve Document Category

Category	Mobile	Cryobiology	Website	GDP
Yes / No	No	No	Yes	No

IRISH BLOOD TRANSFUSION SERVICE PRODUCT MASTER FILE

TITLE: LEUCOCYTES POOLED, RED CELL REDUCED, IRRADIATED, (SOURCE OF **GRANULOCYTES**)

March 2025 Name of Product: LEUCOCYTES Pooled, Red Cell Reduced, Irradiated, (Source of Granulocytes)

E Progesa Codabar Component Code: 54264

E Progesa ISBT-128 Component Code: E8208V00

General Description: Leucocytes Pooled obtained by pooling up to 5 units of buffy coats derived from whole blood within 24 hours of venepuncture by centrifugation and automated separation. The selected donors meet the additional criteria for neonatal use. These pools contain granulocytes as a major cellular component suspended in anticoagulated blood. Red cell content is reduced by removal following centrifugation.

General Specification:

General Specification:	tus	
Parameter	Quality Requirement	Frequency of Control
Volume Range	44 - 62 ml per unit pooled	100 %
Leucocyte Content	1.6 x 10 ⁹ per unit pooled	1%

Labelling: See Appendix A

Leucocytes Pooled, Red Cell Reduced, Irradiated, (Source of Granulocytes) Storage: should be used as soon as possible. If delay is unavoidable, the component should be stored at a core temperature of 22°C ± 2°C without agitation and used within 24 hours.

Irradiation: Leucocytes Pooled, Red Cell Reduced, Irradiated, (Source of Granulocytes) must be irradiated immediately before issue.

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b tł P cl	ore use. During transportation place where they are intend pled, Red Cell Reduced, Irradiat se as possible to the recomme	pt open at room temperature for 30 from the Irish Blood Transfusion Se ed for use, the temperature of Leu ed, (Source of Granulocytes) must be nded storage temperature. On receip uld be transferred to storage at 22°
	y be used in severely neutr eiving adequate antibiotic ther	openic patients with proven seps apy.
•	required. Leucocytes Pooled, Red Cell Re should be infused intravenousl um filter. Leucocytes Pooled, Red Cell Re must be irradiated before trans No solution should be added to Components should be inspect colour or visible clots. Rh D negative female recipient not be transfused with Leuco Source of Granulocytes) from	o the bag or giving set. ted visually for defects, leakage, al s of child bearing potential should pr cytes Pooled, Red Cell Reduced, Irr
Adverse Effects Include: • • • • • •	occur, but is minimised by e radiation before transfusion <u>Hypersensitivity reactions</u> ma chills and fever; <u>Non-haemolytic transfusion r</u> urticaria); <u>Anaphylaxis</u> <u>Pathogen transmission</u> Despite careful donor select	e to transfusion of viable lymphocyte xposure of the suspension to ionising

- viruses and protozoa (e.g. malaria) may, in rare instances, occur. - vCJD transmission
- Transmission of other pathogens that are not tested for or recognised.
- The risk of CMV transmission is minimal as the components are CMV-
- Sepsis due to bacterial contamination
- Immunological effects
 - Alloimunisation to HLA, HPA and red cell antigens
 - Post Transfusion purpura (PTP), especially in parous female recipients

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- Graft versus host disease due to transfusion of viable lymphocytes can occur, but is minimised by exposure of the suspension to ionising radiation before transfusion
- Transfusion related Acute Lung injury (TRALI) by donor HLA/granulocyte antibodies
- Metabolic upset
 - Citrate toxicity, especially in neonates and in patients with impaired hepatic function.
 - \uparrow K⁺ in massive transfusions, especially where patient is hypothermic or acidotic or has impaired renal function.
 - Hypocalcaemia.
 - Hypoglycaemia.
 - Hypokalaemia.
- Iron overload
 - In patients on chronic red cell transfusion support programmes.

Serious Adverse Reaction

Please inform the IBTS immediately about any event relating to suspected bacterial sepsis/ transfusion associated bacterial sepsis

Serious adverse reactions should be reported to:

National Haemovigilance Office

Irish Blood Transfusion Service National Blood Centre James's Street Dublin 8

AND

Quality Assurance Manager

Irish Blood Transfusion Service

<u>AT EITHER</u>

National Blood Centre James's Street Dublin 8

Munster Regional Transfusion Centre St Finbarr's Hospital Douglas Road, Cork



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