

Document Detail

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Title: WHOLE BLOOD AUTOLOGOUS

Owner: QA DOC CON QA DOC CONTROL

Status CURRENT
Effective Date: 19-May-2025
Expiration Date: 19-May-2027

Review

Review: IBTS PMF REVIEW

Level	Owner Role	Actor	Sign-off By
1	DOCUMENT CONTROLLER	BECKY WHITE	BECKY WHITE
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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/0219/25

IRISH BLOOD TRANSFUSION SERVICE PRODUCT MASTER FILE

TITLE: WHOLE BLOOD AUTOLOGOUS

Change Description:

Revise the Labelling and Barcode Illustrations.

Reason for Change:

Status CURRENT Effective 19 To update the PMFs with new Label Versions (Ref CC 208/23 & 002/24)

Change order No.:

IBTS/CO/0219/25

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: Whole Blood Autologous

Name of Product: WHOLE BLOOD for Autologous Transfusion (CPDA1)

E Progesa Codabar Component Code: 30002

E Progesa ISBT-128 Component Code: E4396100

General Description: Unit of whole blood collected for the **sole purpose** of re-infusion

into the donor, if required. The removal of the majority of

leucocytes is achieved by filtration.

General Specification: Autologous donations shall be identified, collected, processed

and verified as to quality according to Standard Operating

Procedures for homologous blood donations.

Storage: Whole Blood, Leucodepleted for Autologous Transfusion should

be stored at 4° C \pm 2° C. Autologous blood and blood components

must be stored separately. The storage time is 35 days.

Labelling: See Appendix 1

Transportation: The air temperature of the validated transport containers for units

of Whole Blood for autologous transfusion should be maintained between 2°C and 10°C during transport from the Irish Blood Transfusion Service to the place that they are intended for use. Transport time under these conditions normally should not exceed

8 hours.

Indications for Use:

Whole blood for autologous transfusion can be used in

selected elective surgical patients.

Whole blood for autologous transfusion can also be considered

for individuals with rare blood groups or with rare or multiple

red cell antibodies.

Precautions in Use:

• Careful selection of appropriate patients is an important part

of a safe and successful autologous pre-deposit programme.

- One or more venesections over a period of weeks may result in morbidity which needs to be balanced against the potential risks of receiving blood from volunteers.
- Careful attention to documentation is essential to reduce the risk of a clerical error which may lead to a haemolytic transfusion reaction.
- Pre-deposited blood should be transfused using similar clinical indications to those for allogeneic transfusion; it should not be transfused simply because it is available.
- Whole blood should be infused intravenously through a set containing an inline 170-200 μm filter.

Adverse Effects:

- Acute sepsis due to bacterial contamination.
- Autologous transfusions are also susceptible to adverse events such as acute haemolytic transfusion reactions that arise from errors in patient/recipient identification, and from failure to store the product within specified parameters.

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 ManagerIrish Blood Transfusion Service

AT EITHER

National Blood Centre James's Street Dublin 8

<u>OR</u>

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

APPENDIX 1

E Progesa Codabar Component Code: 30002

E Progesa ISBT -128 Component Code: E4396100

ine 19 May 2025 **Product Name: Shelf Life:** WHOLE BLOOD for Autologous

Transfusion (CPDA1)

Additional Tag containing the following data:

Side 1 Side 2

Donor's name **Unit Number**

Address Name of admitting hospital

Date of Birth Donor's Signature

Medical Officer's Signature

Labelling and Barcodes:

(for illustration purposes only - barcodes not suitable for scanning - label not to scale)

IBTS ver 5.0

WHOLE BLOOD for Autologous Transfusion (CPDA1)

Store at 4°C ± 2°C



Drawn 09 May 2025



This component must not be used if there are visible signs of deterioration. This component may transmit infection

E4396100

Must be administered using a suitable transfusion set incorporating a 170 – 200 µm filter. Collected into 66 ml of CPDA1 anticoagulant containing, in mmol/l:

Citric Acid 16, Sodium Citrate 89, Sodium dihydrogen phosphate 16,





300 ml

Expiry 13 June 2025 23:59



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