

# **Document Detail**

51	PMF IBTS SPEC
Document No.:	IBTS/PMF/SPEC/0207[3]
Title:	WHOLE BLOOD, RECONSTITUTED, SUITABLE FOR
	NEONATAL USE
Owner:	QA DOC CON QA DOC CONTROL
Status	CURRENT
Effective Date:	13-May-2021
<b>Expiration Date:</b>	04-Aug-2025

#### <u>Review</u>

Review: IBTS PMF REVIEW

Level	<u>Owner Role</u>	Actor	<u>Sign-off By</u>
1	DOCUMENT CONTROLLER	REBECCA WALDEN	REBECCA WALDEN
1	QUALITY ASSURANCE WRITER IBTS	REBECCA WALDEN	REBECCA WALDEN
3	LABS PHS DIR IBTS	BARRY DOYLE	BARRY DOYLE
3	NATIONAL MEDICAL DIRECTOR	STEPHEN FIELD	STEPHEN FIELD
4	QUALITY ASSURANCE REVIEWER IBTS	COLIN JOHNS	COLIN JOHNS
l	Review: IBTS DOC PERIODIC REVIEW		
Level	<u>Owner Role</u>	Actor	Sign-off By
1	DOCUMENT CONTROLLER	REBECCA WALDEN	REBECCA WALDEN
2	SSCD HEAD OF DEPT IBTS	AILEEN FARRELLY	AILEEN FARRELLY
2	QUALITY ASSURANCE WRITER IBTS	REBECCA WALDEN	REBECCA WALDEN
3	NATIONAL MEDICAL DIRECTOR	TOR HERVIG	TOR HERVIG
3	COMPONENTS HEAD OF DEPT MRTC	AINE FITZPATRICK	AINE FITZPATRICK
3	LABS PHS DIR IBTS	BARRY DOYLE	BARRY DOYLE
4	DIRECTOR OF QUALITY	KAREN BYRNE	KAREN BYRNE
4	QUALITY ASSURANCE REVIEWER IBTS	COLIN JOHNS	COLIN JOHNS

### **Change Orders**

Changes as described on Change Order:

Change Order No.

**Change Orders - Incorporated** 

Changes as described on Change Order:

Change Order No. IBTS/CO/0229/21

Valid on Day of Printing, Verify Current Version Printed By: Date:

### **IRISH BLOOD TRANSFUSION SERVICE**

# **PRODUCT MASTER FILE**

#### TITLE: WHOLE BLOOD, RECONSTITUTED, SUITABLE FOR **NEONATAL USE**

### **Change Description:**

Revise IBTS/PMF/SPEC/0203 to IBTS/PMF/SPEC/0212 and IBTS/PMF/SPEC/0232 to amend the product labels.

### **Reason for Change:**

Fix to the labels with reference to IR 361/21/IBTS, IBTS/QA/PQ/0600 Deviation 012 and CC rs. Lise. Status 134/21/IBTS

# **Change order No.:**

IBTS/CO/0229/21

**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
letti '				
70				

IBTS/PMF/SPEC/0	207	Ver. 3	Page 3 of 7
	IR	ISH BLOOD TRANSFUSION	SERVICE
		PRODUCT MASTER F	ILE
Title: Whole Blo	od, Re	constituted, Suitable for Neor	natal Use
Name of Products:	WH	OLE BLOOD, Reconstituted,	Suitable for Neonatal Use. HCT:
		OLE BLOOD, Reconstituted, diated. HCT:	Suitable for Neonatal Use,
E Progesa Codabar C	ompoi	nent Codes : 54270	54271
E Progesa ISBT – 128	Comp	oonent Codes : E8211V00	/ E8213V00
General Description: This component is prepared by combining a unit of red cells (following removal of additive solution) with a unit of thawed fresh frozen plasma (group AB). The donors of the selected components meet the additional criteria as being suitable for neonatal use			
<b>General Specification</b>	•		

General Specification:			
Parameter	Quality Requirement	Frequency of Control	
Volume	>340 mL	100%	
Haematocrit	≥0.35 L/L	100%	
Haemoglobin	$\geq$ 40 g/unit	100%	
Leucocyte Content	< 1 x 10 <sup>6</sup> / unit	Counted in units of red cells (04333/E7429V00)	
Haemolysis at end of shelf life	< 0.8% of red cell mass	100%	
ABO Agglutinins	No High Titre Anti-A or Anti-B	100%	
CMV	CMV ab negative	100%	

# **General Specification:**

Labelling: See Appendix I

Whole Blood, Reconstituted, Suitable for Neonatal Use. HCT:... / Whole Blood, Reconstituted, Suitable for Neonatal Use, Irradiated, HCT:...should be stored at  $4^{\circ}C \pm 2^{\circ C}$ . Storage:

IBTS/PMF/SPEC/0207	Ver. 3	Page 4 of 7
		0

- **Irradiation:** Whole Blood, Reconstituted, Suitable for Neonatal Use HCT:...should be irradiated before transfusion provided this does not unduly delay the transfusion. Post irradiation the component code changes to 54271/E8213V00 and the product should be used within 6 hours. It **must** be irradiated prior to transfusion where the neonate has had a previous intrauterine transfusion.
- **Transportation:** The air temperature of transport containers for units of Whole Blood, Reconstituted, Suitable for Neonatal Use HCT:... / Whole Blood, Reconstituted, Suitable for Neonatal Use, Irradiated, HCT:... should be maintained between 2°C and 10°C during transport from the Irish Blood Transfusion Service to the place where they are intended for use. Transport time under these conditions normally should not exceed 8 hours.

**Indications for Use:** Whole Blood, Reconstituted, Suitable for Neonatal Use HCT:... / Whole Blood, Reconstituted, Suitable for Neonatal Use, HCT:... Irradiated, is suitable for exchange transfusion and is used to augment the oxygen delivery capacity of the blood where this is critically impaired.

### **Precautions in Use:**

- Compatibility of red cells with the intended recipient must be verified by suitable pretransfusion testing.
- Red Cells, Washed / Red Cells, Washed, Irradiated should be infused intravenously through a set containing an inline 170-200 µm filter.
- No other solutions should be added to the bag or giving set.
- Components should be inspected visually for defects, leakage, abnormal colour or visible clots.

### Adverse Effects Include:

- Circulatory Overload.
- Haemolytic transfusion reaction;
- Non-haemolytic transfusion reaction (mainly chills, fever and urticaria).

The risk is reduced by leucodepletion and washing

- <u>Pathogen transmission</u>
  - Despite careful donor selection and laboratory screening procedures, infections including Syphilis, Viral Hepatitis, HIV, HTLV 1 & 11 and other 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 leucodepleted
  - Sepsis due to bacterial contamination (reduced but not eliminated by bacterial screening)
- <u>Metabolic upset</u>
  - Possible elevated potassium level in massive transfusions, especially

where patient is hypothermic or acidotic or has impaired renal function.

- Citrate toxicity, especially in neonates and in patients with impaired hepatic function.
- Hypocalcaemia.
- Hypoglycaemia.
- Hypokalaemia.
- <u>Immunological effects</u>
  - Alloimunisation to HLA and red cell antigens.
  - Graft vs Host Disease (GvHD) in immuno compromised recipients . The risk of GvHD is eliminated by irradiation
  - Transfusion related Acute Lung injury (TRALI) by donor HLA/granulocyte antibodies.
  - Post transfusion purpura (PTP).
- 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

### AT EITHER

National Blood Centre James's Street Dublin 8

OR

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



