

**Request for INVESTIGATION of Suspected TRANSFUSION REACTION**

1. Inform the transfusion laboratory immediately. FH 26489, RVI 24335.
2. Send 'Request for INVESTIGATION of Suspected TRANSFUSION REACTION form with;
  - (i) 2 x 4 ml EDTA specimen for 'Group and Save'.
  - (ii) Remains on ALL previously transfused units in your possession.
  - (iii) The last unit transfused with giving set still attached
  - (iv) Any unused units.
3. Normal request forms and samples for FBC, U&E, LFT's and Blood cultures from patient.

**To be completed by Medical Staff – ALL fields MUST be completed**

Surname:	Hospital Number:	
Forename:	Sex:	DOB:
Consultant:	Ward/Hospital:	
Requesting MO (Print):	Date/Time Taken:	

**TRANSFUSION DETAILS**

Transfusion started at \_\_\_\_\_ am/pm on \_\_\_\_\_

Transfusion stopped at \_\_\_\_\_ am/pm on \_\_\_\_\_

How long was blood out of the fridge before start of transfusion? \_\_\_\_\_

Approximate volume transfused from last bag? \_\_\_\_\_ (mL)

Last blood bag number \_\_\_\_\_ Expiry date \_\_\_\_\_

**CLINICAL DETAILS**

At the start of transfusion: Temperature \_\_\_\_\_ BP \_\_\_\_\_ Pulse \_\_\_\_\_

At the end of transfusion: Temperature \_\_\_\_\_ BP \_\_\_\_\_ Pulse \_\_\_\_\_

**Tick as appropriate:**

<input type="checkbox"/> Facial oedema	<input type="checkbox"/> Urticaria/Itching	<input type="checkbox"/> Rigors	<input type="checkbox"/> Pain in vein	<input type="checkbox"/> Dyspnoea
<input type="checkbox"/> Cough	<input type="checkbox"/> Vomiting	<input type="checkbox"/> Basal Creps	<input type="checkbox"/> Nausea	<input type="checkbox"/> Raised JVP
<input type="checkbox"/> Lumbar pain	<input type="checkbox"/> Shock	<input type="checkbox"/> Chest Pain	<input type="checkbox"/> Cyanosis	<input type="checkbox"/> Pain in limbs

**TREATMENT GIVEN:**

Date:	Signature of Doctor:	Contact No:
-------	----------------------	-------------



**Newcastle upon Tyne Hospitals NHS Foundation Trust**  
**Flow sheet for the Management of an Acute Transfusion Reaction**

**Symptoms / Signs of Acute Transfusion Reaction**  
 Fever, chills, flushing, urticaria, bone / muscle pain, nausea, dyspnoea, collapse, hypotension, dark urine or patient unwell

**Stop the transfusion, call the doctor**  
 Check vital signs and Check the identity of the recipient, details on the unit and documentation match  
 Check the unit for abnormal discoloration, leaks or tears

**Is this the wrong unit and is it ABO incompatible?**

**Wrong unit / ABO incompatibility**  
 Remove unit and giving set  
 Start iv saline infusion  
 Maintain urine output at >100mls/hr  
 Inform the transfusion laboratory immediately

**Mild Febrile Reaction?**

Temp. rise < 1.5°C, otherwise well and observations stable:  
 Give 1g paracetamol po and restart infusion at slower rate.  
 Observe more frequently

**Severe allergic reaction**  
 Bronchospasm, angioedema, abdominal pain, hypotension  
 Discontinue transfusion. Give chlorpheniramine 10mg slowly iv, O2, salbutamol nebuliser if hypotensive give adrenaline 0.5ml of 1 in 1000 i.m. Send sample for anti IgA antibodies and seek haematological advice for future transfusions

**Mild ?**

**Allergic Reaction?**

**Persists or patient becomes unwell**

**Mild allergic reaction**  
 Urticaria / rash only  
 Give 10mg chlorpheniramine slowly iv and restart infusion at slower rate

**Other severe reaction - Non respiratory**

**Patient unwell e.g. high fever/rigors/hypotension/back pain ?Acute Haemolysis ?bacterial contamination**  
 Remove unit and giving set and return with all used / unused units to transfusion lab. Start iv saline. Take blood cultures and samples for repeat group / crossmatch / DAT, FBC, Coag., U&E's, LFT's  
 Check for haemoglobinuria and monitor urine output Start iv antibiotics if suspected bacterial transmission  
 Seek senior haematological advice

**TRALI**  
 Clinical features of acute LVF with fever and chills.  
 Discontinue transfusion. Give 100% O2 and ventilate if required. Inform haematologist

**Symptoms mainly Respiratory - dyspnoea / cough**

Contact Blood Bank  
 FRH 37849  
 RVI 24335  
  
Transfusion Nurses  
 48852 or 48853 (during day)

**TACO**  
 Discontinue transfusion  
 Give O2 and i.v. frusemide 40-80mg i.v.