

#### **Document Detail**

Type: PMF IBTS SPEC

**Document No.:** IBTS/PMF/SPEC/0203[4]

Title: WHOLE BLOOD SUITABLE FOR NEONATAL USE

Owner: QA DOC CON QA DOC CONTROL

Status CURRENT
Effective Date: 13-May-2021
Expiration Date: 13-May-2023

#### Review

**Review:** IBTS PMF REVIEW

<u>Level</u> Owner Role <u>Actor</u> <u>Sign-off By</u>

1 DOCUMENT CONTROLLER REBECCA WALDEN REBECCA WALDEN
2 QUALITY ASSURANCE WRITER IBTS REBECCA WALDEN
3 LABS HEAD OF MANUFACTURING & ISSUE IBTS BARRY DOYLE BARRY DOYLE
3 NATIONAL MEDICAL DIRECTOR STEPHEN FIELD STEPHEN FIELD
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/0229/21

# IRISH BLOOD TRANSFUSION SERVICE PRODUCT MASTER FILE

TITLE: WHOLE BLOOD 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 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

# IRISH BLOOD TRANSFUSION SERVICE

#### PRODUCT MASTER FILE

Title: Whole Blood Suitable for Neonatal Use

Name of Products: WHOLE BLOOD, Suitable for Neonatal Use for 5 days

after Date Drawn / WHOLE BLOOD Suitable for

**Neonatal Use, Irradiated** 

E Progesa Codabar Component Codes: 03151 / 39355

E progesa ISBT – 128 Component Codes: C6468V00 / C5584V00

General Description: The unit of blood is collected into CPD (Citrate, Phosphate Dextrose). The

majority of leucocytes in the donation are removed by filtration. The

selected donors meet the additional criteria for neonatal use.

**General Specification:** 

Parameter	Quality Requirement	Frequency of Control
Volume	450-525 mL	100%
Haematocrit	≥0.35	≥1%
Haemoglobin	≥ 45 g/unit	≥1%
Leucocyte Content	< 1 x 10 <sup>6</sup> / unit	1 per week
Haemolysis at end of shelf life	< 0.8% of red cell mass	4 per annum (including irradiated units)
ABO Agglutinins	No HighTitre Anti-A or Anti-B	100%
CMV	CMV ab negative	100%

**Labelling:** See Appendix I

**Storage:** Whole Blood, Suitable for Neonatal Use for 5 days after Date Drawn /

WHOLE BLOOD Suitable for Neonatal Use, Irradiated should be stored at

 $4^{\circ}C \pm 2^{\circ}C$ 

#### **Irradiation:**

Whole Blood, Suitable for Neonatal Use for 5 days after Date Drawn should be irradiated before transfusion provided this does not unduly delay the transfusion. Post irradiation the component code changes to 39355/C5584V00. The irradiated product should be used within 24 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, Suitable for Neonatal Use for 5 days after Date Drawn / WHOLE BLOOD Suitable for Neonatal Use, Irradiated 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, Suitable for Neonatal Use for 5 days after Date Drawn / WHOLE BLOOD Suitable for Neonatal Use, 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 this component with the intended recipient must be verified by suitable pre transfusion testing.
- Should be transfused through a standard 170 200 μm filter.
- No solution should be added to the bag or to the giving set.
- Components should be inspected visually for defects, leakage, abnormal colour or visible clots.
- Not recommended in:
  - various types of plasma intolerance.
  - repeated leucocyte antigen/antibody mediated reaction unresponsive to medication

#### **Adverse Effects Include:**

- <u>Circulatory Overload.</u>
- Thrombocytopenia
- <u>Haemolytic transfusion reaction</u>
- <u>Non-haemolytic transfusion reaction</u> (mainly chills, fever and urticaria). The risk is reduced by leucodepletion
- Anaphylaxis

#### • Pathogen transmission

- 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)

#### • Metabolic upset

- 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.

#### • Immunological effects

- 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

## APPENDIX I

E Progesa Codabar Component Code: 03151

C6468V00 E Progesa ISBT – 128 Component Code:

**Product Name** 

WHOLE BLOOD, suitable for Neonatal Use for 5 Days after Date Drawn

Shelf life

28 days

## **Labelling and Barcode:**

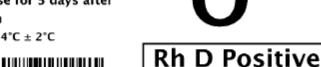
(for illustration purposes only – barcodes not suitable for scanning – label not to scale)



IBTS ver 4.0

WHOLE BLOOD, Suitable for Neonatal Use for 5 days after Date Drawn

Store at 4°C ± 2°C





CMV Antibody Negative

Drawn 05 May 2021



are visible signs of deterioration. This component may transmit infection

Must be administered using a suitable transfusion set incorporating a 170 – 200 µm filter. Collected into 66 ml of CPD amticoagulant containing,

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





Expiry 02 June 2021 23:59



C- c+ E- e+ K- HbS-Neg



Expiry 02/06/2021



# **APPENDIX I**

E Progesa Codabar Component Code: 39355

C5584V00 E Progesa ISBT – 128 Component Code:

**Product Name** WHOLE BLOOD, Suitable for Neonatal Use, Irradiated

Shelf life 24 hours

# **Labelling and Barcode:**

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



IBTS ver

WHOLE BLOOD, Suitable for Neonatal Use, Irradiated

Store at 4°C ± 2°C

Drawn 05 May 2021



IRRADIATED (24 H) CMV Antibody Negative

Expiry 06 May 2021 13:03

C- c+ E- e+ K- HbS-Neg



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

Must be administered using a suitable transfusion set incorporating a 170 – 200 µm filter. Collected into 66 ml of CPD amticoagulant containing,

Expiry 06/05/2021



N.B. Stated volume for illustration purposes only.