RED BLOOD CELLS:

In emergency situations, with Physician signature, **group O Rh negative uncrossmatched** RBC units can be released immediately. In urgent situations, with Physician signature, **ABO/Rh group specific uncrossmatched** RBCs can be released within 10 minutes.

A Stat order for **Type and Crossmatch** RBCs can be completed in an hour or less, unless alloantibodies are found. A Priority order for **Type and Crossmatch** RBCs can be ready in 4 hours, and Routine orders in 8 hours, unless alloantibodies are found.

Where probability of transfusion is low, **Type and Screen** orders are preferred, so that units in inventory are not removed from availability for other patients.

If indicated, Special Attributes (leukoreduced, CMV negative, irradiated, volume reduced, or washed RBCs) may also be requested (See **Special Attributes**).

You must always obtain informed consent before administration of all blood products. Most hospitals require one or two physicians to sign a note attesting to the necessity of an order when informed consent cannot be obtained. A Blood Bank Pathologist must be on-call at all times, and can be reached through the Blood Bank.
Additional RED BLOOD CELL information is available on the RBCs Webpage.

PLASMA:
Most Trauma Center Blood Banks keep units of Thawed Plasma ready, so that in emergency situations, with Physician signature, **group AB Rh positive uncrossmatched** Plasma can be released immediately. In urgent situations, with Physician signature, **ABO/Rh group specific uncrossmatched** Plasma can be released in about 20 minutes.

Units of Fresh Frozen Plasma (FFP) are often abbreviated as Plasma when ordered, and are usually ordered in quantities of 2 to 4 units at a time. In many hospitals, the Blood Bank may fill up to 50% of your FFP order with Plasma Frozen within 24 Hours and/or Thawed Plasma in order to coordinate Blood Bank inventory with anticipated hospital needs. FFP may take up to 30 minutes to thaw and be ready for transfusion.

You must always obtain informed consent before administration of all blood products. Most hospitals require one or two physicians to sign a note attesting to the necessity of an order when informed consent cannot be obtained. A Blood Bank Pathologist must be on-call at all times, and can be reached through the Blood Bank.

Additional PLASMA information is available on the Plasma Webpage.

PLATELETS:
For adults, Platelets are often ordered as five (5) or six (6) pooled Random Donor units (also called Whole Blood-derived Platelets), or alternatively as one (1) Single Donor pack (also called Apheresis-derived Platelets). One Single Donor pack contains approximately the same number of Platelets as contained in six to eight Random Donor units.

If indicated, Special Attributes (leukoreduced, CMV negative, irradiated, volume reduced, or washed RBCs) may also be requested **(See Special Attributes)**.

You must always obtain informed consent before administration of all blood products. Most hospitals require two physicians to sign a note attesting to the necessity of an order when informed consent cannot be obtained. A Blood Bank Pathologist must be on-call at all times, and can be reached through the Blood Bank.

Additional PLATELET information is available on the Platelets Webpage.

CRYOPRECIPITATE:
Cryoprecipitate is usually ordered in quantities of 6 to 10 pooled units at a time. Cryoprecipitate units may take up to 30 minutes to thaw, be pooled, and ready for transfusion.

You must always obtain informed consent before administration of all blood products. Most hospitals require one or two physicians to sign a note attesting to the necessity of an order when informed consent cannot be obtained.
A Blood Bank Pathologist must be on-call at all times, and can be reached through the Blood Bank.

Additional CRYOPRECIPITATE information is available on the Cryoprecipitate Webpage.

GRANULOCYTE CONCENTRATE:
Granulocyte concentrate consists of the white blood cell fraction collected from a single donor and is reserved and directed to a specific critically ill patient, often a newborn with sepsis. All Granulocyte Concentrates must be crossmatch compatible, and irradiated, prior to release for transfusion (see Special Attributes).

Planning for all transfusions of Granulocyte Concentrate must be pre-arranged by communication with the Blood Bank. A Blood Bank Pathologist must be on-call at all times, and can be reached through the Blood Bank.

Additional GRANULOCYTE CONCENTRATE information is available on the Granulocyte Concentrate Webpage.

SPECIAL ATTRIBUTES:
Special Attributes apply only to cellular blood products, which are Red Blood Cells and Platelets. Special Attributes include products which are Leukoreduced, CMV seronegative, Irradiated, Volume-reduced, and Washed. [Phenotype-specific RBCs and HLA-matched Platelets are discussed on other Webpages (See RBCs or Platelets)].

Each Special Attribute has its own specific ordering criteria, which must be met before the Blood Bank is bound to comply with an order request. A Blood Bank Pathologist must be on-call at all times, and can be reached through the Blood Bank.

Additional Special Attributes information is available on the Special Attributes Webpage.

TRANSFUSION REACTIONS
Transfusion Reactions information is available on the Transfusion Reactions Webpage.

INFECTION RISKS of TRANSFUSION:
Infection Risks of Transfusion information is available on the Infection Risks Webpage.

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