

Issued by JPAC: 11 May 2021	Implementation:	To be determined by each Service
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Change Notification UK National Blood Services No. 14 - 2021

Transfusion

This change applies to the Deceased Tissue Donor Selection Guidelines

Please amend the following sections of this entry:

Obligatory:	 Must not donate if: At any time the donor has: a) Received, or thinks they may have received, a transfusion of blood or blood components in a country endemic for malaria or South American trypanosomiasis. See 'Discretionary' section below for exceptions. b) Has received regular treatment with blood derived coagulation factor concentrates. 2.Since January 1st 1980: a) Anywhere in the world, the donor has received, or thinks they may have received, a transfusion with red cells, platelets, fresh frozen plasma (FFP) or cryoprecipitateintravenous or subcutaneous human normal immunoglobulin. This includes mothers whose babies have required intra-uterine transfusion. b) Had a plasma exchange performed. 3. Before January 1st 1999: a) Treated with prothrombin complex to reverse over-anticoagulation. b) Received intravenous or subcutaneous human normal immunoglobulin.
Discretionary:	 1. a) If on medical inquiry it is unlikely that the donor has been transfused, accept. b) Received, or thinks they may have received, a transfusion of blood or blood components before 1st Jan 1980, accept – See 4 below if transfused abroad. c) If treatment with human immunoglobulin has been limited to small quantities of specific immunoglobulin as prophylaxis (e.g. rhesus, tetanus, hepatitis, immunoglobulin etc.), accept. d) If the only transfusion has been within the last week of life, accept. e) Treated with prothrombin complex (PCC) to reverse over-anticoagulation after 1st January 1999, accept. f) If treated with intravenous immunoglobulins after 1st January 1999: if underlying condition is not a contraindication, accept. Refer to designated clinical support officer if further advice required.

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	 Autologous Transfusion: If only the donor's own blood has been used, accept.
	3. Heart valve, ocular tissue, skin and pancreatic islet donors only: Provided the donor's total transfusion exposure is limited to less than 80 units of blood or blood components, accept. – See 4 below if transfused abroad.
	 4. Donor transfused in a country endemic for malaria or South American trypanosomiasis: a) Check the Geographical Disease Risk Index. If transfused in an at risk endemic country and a validated malarial antibody test and/or (as appropriate) a validated test for T.cruzi antibody is negative, accept. b) If tissue will be sterilized by irradiation post-donation: Accept (testing not required) c) For Eyes only, if the risk was for Malaria or South American trypanosomiasis, accept for corneas only (testing not required).
Reason for Change:	To permit donation from donors who have received a one off dose of PCC since 1999 for prophylaxis or reverse anticoagulation. To improve clarity with regard to donors transfused in other parts of the world. intravenous immunoglobulin after 1 st January 1999, if the reason for treatment is not a contraindication.

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