

The Update December 2016

For Action

Placing blood orders for patients with Sickle Cell Disease Please give us your feedback on Transport's new web page Donation Identification Number (DIN) sequences for LIM systems BSH guidelines on transfusion for fetuses, neonates and older children for the attention of Paediatric and Neonatal teams

For Information

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For Action

Placing blood orders for patients with Sickle Cell Disease

When red cells are intended for a patient with sickle cell disease please ensure the HbS tick box is selected in OBOS. This helps us ensure that appropriate red cells are selected for your patient. Failure to select will mean that red cells will be issued that are not HbS negative. In order to help us to better plan our stock levels we request that you populate the appropriate box to indicate that the component is for either a sickle or thalassaemic patient.

We are planning to develop OBOS so that when an order is indicated to be for a sickle patient, the tick will also populate the HbS negative tick box.

If you have any queries please email <u>OBOS@nhsbt.nhs.uk</u> or contact your local Customer Service Manager.

Craig Wilkes, Regional Customer Service Manager - South West

Feedback on NHSBT Transport's new web page

Please take a look at the <u>page</u> which highlights the work done by our Transport team and provides on overview of the department, facts and figures and news.

If there is something you'd like to see on the page please email Customer Services (<u>nhsbt.customerservice@nhsbt.nhs.uk</u>) with your suggestion.

Keith Grimmett, Process Improvement Manager

Donation Identification Number (DIN) sequences for LIM systems

Please ensure that your LIM system will accept the new number sequences for:

- Fresh Frozen Plasma, Methylene Blue Treated and Removed, Leucocyte Depleted
- Cryoprecipitate, Methylene Blue Treated and Removed, Leucocyte Depleted
- Fresh Frozen Plasma, Neonatal use, Methylene Blue Treated and Removed, Leucocyte Depleted

The sequences are:

- <u>G0040</u>
- <u>G0050</u>
- <u>G0060</u>
- <u>G0070</u>
- <u>G0080</u>
- <u>G0090</u>

This should be done as soon as possible as products are now being manufactured with these DINs.

The specification, indication for clinical use, storage and handling requirements, and protocol for placing orders via OBOS remain the same as current components.

If you have any queries or would like a copy of the original email about the DINs sent to Transfusion Laboratory Managers, please contact your local Customer Service Manager.

Rukhsana Hashmat, Customer Service Manager - North West

For the attention of Paediatric and Neonatal teams: BSH guidelines on transfusion for fetuses, neonates and older children

The British Journal of Haematology published the <u>guidelines on transfusion for fetuses, neonates</u> and older children in November 2016.

The PBM Team has produced a <u>short video</u> where the lead author, Dr Helen New, shares practice points and key recommendations to highlight the importance of this publication.

Also we are keen to find out if you would like to watch video updates in the future so do let us know.

Please share the guidelines with your paediatric and neonatal teams so they are aware of the key practice points and recommendations. The clinical sections have been written to be as accessible as possible to clinicians, with relevant explanation about laboratory aspects.

Helen New, Consultant Paediatric Haematologist

For Information

Live OBOS version 7.3.3 release Sunday 15 January 2017

Unfortunately due to changes required to Pulse we have had to reschedule the release to next year.

The updates in the release are:

• HEV tick box

Users were advised which components required the use of the tick box following implementation of HEV testing (please see The Update January 2016). In this version the tick box will auto populate for any component where HEV negative is mandatory.

Methylene Blue treated components will have the HEV tick box 'greyed' out.

• Order and Line note comments

The 'Line note comments' section of the request screen will no longer be a free text box. It has been developed to generate a dropdown menu that contains the most frequently used comments that are not available within the other sections on the order request screen. This has been introduced to enhance the process of ordering and ensure patient safety.

These updates have been released on the training system

If you have any queries, comments or concerns please email <u>OBOS@nhsbt.nhs.uk</u> or contact your local Customer Service Manager.

Craig Wilkes, Regional Customer Service Manager - South West

Tools for National Blood Transfusion Committee (NBTC) Indication Codes for Transfusion

The NBTC indication codes amalgamate current guidance on blood transfusion practice into a brief summary to facilitate appropriate use and documentation.

The codes were updated in June 2016 and for the first time contain a section on appropriate indications for prothrombin complex concentrate. They also renumber the indications for each component. The means more common reasons are listed first and redundant reasons, such as the use of FFP to reverse warfarin, have been removed.

Following the previous edition in 2013 a bookmark was produced by NHSBT which has been well received by hospitals with requests of over 3,000 bookmarks per month in 2015 / 16. A <u>bookmark</u> and <u>poster</u> are now available and an <u>iPhone app</u> makes the information even more accessible at the point of need (in the App Store search for 'blood codes').

At present the app is not available for other smart phones.

Janet Birchall, Consultant Haematologist

Universal Human T-Lymphotrophic Virus (HTLV) screening will cease 15 January 2017

NHSBT are moving from universal HTLV screening to selective screening of only the following:

- New donors
- Existing donors without a negative HTLV result on our current PULSE database.
- Donations intended for the manufacture of non-leucodepleted components, that is, pooled granulocyctes and clinical buffy coats

Background

JPAC proposed the move away from universal testing and this was approved by SaBTO in September 2015. This was based on the following evidence:

- Most HTLV is acquired at birth or early in life
- The sero-conversion rate amongst donors is very low
- Leucodepletion provides additional safety

Due to low sero-conversion rates in repeat donors combined with high rates of HTLV removal by leucodepletion, the increased patient risk was considered negligible.

Options for HTLV Screening within the UK Blood Services, JPAC HTLV Working Group http://www.transfusionguidelines.org/document-library/options-for-human-t-lymphotropic-virus-htlvscreening-with-the-uk-blood-services-updated-october-2015-r

Christine Gallagher, Regional Customer Service Manager (North)

For Training

Training, Education Events and Courses 2017

We are pleased to announce our training course dates.

Please note the date for Advanced Transfusion Masterclass in Newcastle has changed from 14 November to 11 January.

Blood Centre tours

An overview of NHSBT and the workings of Blood Centre laboratories. We offer half day tours in Filton, Newcastle, Colindale, Manchester and Sheffield.

Practical Introduction to Transfusion Science

A five day course to provide basic theoretical information and an introduction to routine practical techniques. The course runs in Filton, Sheffield, Manchester, Newcastle and Tooting.

Specialist Transfusion Science Practice

A one week course to provide specialist level theoretical and practical information relating to more complex aspects of transfusion science. The course runs in Filton, Tooting, Sheffield, Newcastle and Manchester.

Non-Medical Authorisation of Blood Components

A four day programme for senior nurses and midwives who are working towards making the clinical decision. The course provides the written instruction for blood component transfusion. The course runs in Sheffield, Manchester, Filton, Colindale and Tooting.

Essential Transfusion Medicine / Intermediate Transfusion Medicine

To meet the training needs of Specialist Registrars and Clinical Scientists who are studying for Part 1 RCPath exam.

With the option of one week Essential Transfusion Medicine or three weeks Intermediate Transfusion Medicine, or all four weeks running back to back. You may attend the first week, the last three weeks or the full 4 weeks. Manchester and Tooting

RCPath Pre Exam Revision Course (a one week course). Spaces available in Manchester, Tooting and Filton.

Ruth Evans, OD Manager Scientific Training

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