NHS
Blood and Transplant

The Update for November 2022

SHOT module in the new eLearning programme
Consisting of 3 videos

Our colleagues in the Patient Blood Management and Digital Learning teams have developed Blood Transfusion Training (BTT, to replace learnbloodtransfusion modules) which includes a SHOT module. The module consists of three videos:

- an overview of haemovigilance
- reporting to SHOT, and learning from haemovigilance
- an assessment

Huge thanks and appreciation to the teams for their help: together we are striving to raise awareness and provide user friendly resources to improve transfusion safety.

Fahim Ahmed - SHOT Administrator

Sending fetal RHD screening samples over the December and January bank holidays
For your action to ensure your samples are processed and not rejected

- Please read our information about sending samples and overnight transport times
- Schedule of laboratory working times, transport times to and from our centres and overnight deliveries

For future reference this information is available on the IBGRL website, go to the 'Documents' drop-down.

Erika Rutherford - Business Development Manager, International Blood Group Reference Laboratory

Are you interested in an Advanced Transfusion Science Masterclass in Spring 2023?
We want to assess interest in this masterclass

All we need is for you to answer Yes or No online, and if yes, say what topics you'd like to see covered; you'll be able to do this up to 2 January 2023.

Melanie Harper - Educational Delivery Manager, Organisation and Workforce Development

/cont'd

RCI genotyping for therapeutic monoclonal antibody patients
National shortage of DNA extraction kits

It is standard procedure in RCI to obtain a full cell type on all patients receiving, or due to commence, therapeutic monoclonal antibody (TMAb) therapy. This is performed serologically where possible, but molecular typing may be employed if the patient has received a recent transfusion or is DAT positive. This testing is performed by RCI, both when directly requested by the referring hospital and on all new referrals, even if not directly requested by the hospital laboratory.

Due to a national shortage of DNA extraction kits, we will be modifying their approach for the next few months to conserve stocks. Full cell types will still be completed by serological phenotyping where possible. If phenotyping cannot be performed, molecular testing will still be performed if the patient is receiving anti-CD47 TMAbs, if RCI do not have a resolved Rh (C, c, E, e) or K type, if the patient is K+, or if the patient has additional red cell alloantibodies.7

In the interim, genotyping will be omitted for anti-CD38 patients who have a resolved Rh type and are known to be K-. Once DNA extraction kit stock levels have returned to normal, likely in January 2023, these patients will have a genotype performed on the next referred sample.

This interim procedural change has been assessed as low risk due to the robust antibody identification methodologies utilised by RCI in these cases as well as the low reported rates of alloimmunisation in TMAb patients (see Bullock, *et al*, 2021; Tauscher, *et al*, 2021).

If you have any questions, please contact your RCI laboratory

References

Bullock, T; Foster, A; Clinkard, B (2021) Alloimmunisation rate of patients on Daratumumab: A retrospective cohort study of patients in England *Transfusion Medicine* **31**: 474-480

Tauscher, C; Moldenhauer, S; Bryant, S; DiGuardo, M and Jacob, E (2021) Antibody incidence and red blood cell transfusions in patients on Daratumumab. *Transfusion* **61**(12):3468-3472

Mark Dwight - Senior Biomedical Scientist, RCI Filton

/cont'd

SHOT wins at the HSJ Patient Safety Awards on: Human Factors category, on 24 October 2022

The SHOT team were delighted and honoured to win the award for Harnessing a Human Factors Approach to Improve Patient Safety.

The nomination was based on the work SHOT has done over the last decade to embed human factors in transfusion safety. Find out more on the SHOT website.

Fahim Ahmed - SHOT administrator

20th Anniversary of the Systematic Review Initiative (SRI), 2002 - 2022 Future, present and past

This year marks the 20th anniversary of the SRI, a clinical research team based in the Oxford centre of NHS Blood and Transplant.

Future work

Over the next two years, SRI projects are to:

- continue to build our relationship with the International Society of Blood Transfusion (ISBT)
- review our priority areas by updating our James Lind Alliance priority setting partnership exercise
- build a website to publicise our activities
- improve our engagement with those interested in the practice of transfusion medicine

Our work

For the latest news you can follow the team on Twitter:

- @sritransfusion
- @evidencestemc
- @transfusionlib

We have published:

- over 250 papers in scientific journals
- provided the evidence to support the development of over 125 national and international guidelines

We have hosted:

- 16 clinical fellows

/cont'd

We have supported:

- over 100 clinicians and researchers to undertake our systematic reviews

The team

Lise Estcourt directs a team of:

- three systematic reviewers
- three information specialists
- three principal investigators
- one manager

Establishing SRI

December 1998

Following a call by the NHS Executive in their Health Service Circular ‘Better Blood Transfusion’ the SRI was created to develop the evidence base in the field of blood transfusion.

2002

Professors Mike Murphy and David Roberts (NHS Blood and Transplant) and Dr Brian McClelland (Scottish National Blood Transfusion Service) with funding from the four UK Blood Services established the SRI. In October 2002 a clinical research fellow and a junior systematic reviewer were appointed, and with support from experienced researchers, began to explore how to address the SRI’s objective of increasing the evidence base for the practice of transfusion medicine. We began by undertaking and publishing systematic reviews.

2003

The development of our evidence libraries started.

- www.transfusionevidencelibrary.com
- www.stemcellevidence.com

Lise Estcourt - Associate Medical Director Research, Development, and Quality Improvement for Transfusion

Added to this pdf in January 2023:

Updated Component Portfolio

Effective from 23 November 2022

The latest version of the portfolio is now published in the Components section of this website.

Changes in this version are:

- Paediatric references removed from fetal and neonatal components
- Non-UK MB treated fetal and neonatal components moved to appendix 8
- New neonatal platelet component specification (replaces previous specifications)
- New UK sourced plasma and cryoprecipitate specifications
- Granulocyte specifications now refer to INF276
- Updates to platelet component guidance for use
- Addition of LIMs code table in appendix 9
- L551 and L552 Fresh Frozen Plasma product codes removed
- Removed reference to pathogen inactivated platelets from component development
- Removed reference to Red Cells in CPD from non-routine components
- Included reference to the EBMT Handbook webpage
- Included Convalescent Plasma components in appendix 5
- Cryoprecipitate LD (singles) removed
- Updated document format to include hyperlinked headers, contents, and index
- RhD has been updated to D throughout the document
- QM figures have been updated throughout the document
- Specification sheets - removed edition of the Red Book in preparation for digital format
- Move from SSP to InterSol washed platelets
- Change to production lead time of washed platelets

Chris Philips - Head of Hospital Customer Services

The Update is produced by Hospital Customer Service on behalf of NHS Blood and Transplant
NHSBT.customerservice@nhsbt.nhs.uk
0208 201 3107