

To Chief Executives, Medical Directors, Transfusion Laboratory Managers, Transfusion Practitioners, Consultant Haematologist with responsibility for Blood Transfusion, England EPRR

15 July 2024

Stock Position – Pre-Amber O positive and negative, B negative, AB negative, and A positive red cells and pre-Amber A negative platelets

Dear Colleague,

Red Cells

We would like to thank you for the actions you have taken so far to support us. However, our stock, especially of O D negative red cells, is in a very fragile position with a real prospect that we may have to move into Amber Alert.

We need your continued support, now, to help us avoid a worsening position.

Please continue to take the following actions:

- 1) Reduce stockholding of red cells including satellite laboratories, remote fridges, and irradiated stock if safe to do so.
- 2) Limit requests for “fresh red cells” and take a proportional share of K+ units.
- 3) Use O D positive red cells for males, and females over 50 in emergencies where their blood group is unknown.
- 4) Minimise iatrogenic anaemia, take samples from patients only if this will change clinical management.
- 5) Do not proceed with major, deferrable surgery in patients with severe anaemia until it has been properly diagnosed and treated.
- 6) Refer to [NBTC Pre-Amber guidance and shortage plans](#) and continue to implement [Patient Blood Management](#) recommendations including:
 - a) Use of tranexamic acid prior to major surgery.
 - b) Appropriate treatment of iron deficiency anaemia with oral or intravenous iron.
 - c) Appropriate treatment of vitamin B12/folate deficiencies.
 - d) Single unit red cell transfusions if not actively bleeding or on a transfusion programme.
 - e) Use a restrictive red cell transfusion threshold, haemoglobin of 70 g/L unless patient is bleeding, has acute coronary syndrome, or is on a chronic transfusion programme.
- 7) Please support us by accepting substitutions of approximately 20% A D negative red cells when you order A D positive for stock. This action will help ease pressure on A D positive red cell. We will revert to normal as soon as we can.

8) We have capacity to accept new and returning donors. Please encourage donation within your Trust and ask your communications team to contact pressoffice@nhsbt.nhs.uk for an internal comms toolkit to support this.

Please can we stress that at this stage we are not asking you to invoke your emergency plans.

We are sorry for the inconvenience this may cause and thank you, and your Hospital Transfusion Committee, for helping us to resolve this issue.

If you have any questions, please contact your Customer Service Manager. Alternatively phone our Response Desk on 0208 201 3107, 9am to 5pm Monday to Friday; we'll be pleased to help.

Please cascade this letter to laboratory and clinical staff as appropriate.

Kind regards

Dr Lise Estcourt
Medical Director for Transfusion
NHS Blood and Transplant

Professor Cheng-Hock Toh
Chair
National Blood Transfusion Committee

