

**To: Medical Directors, Transfusion Laboratory Managers, Transfusion Practitioners, Chair of HTC, Chair of RTC, Consultant Haematologist with responsibility for Blood Transfusion, England EPRR, Chief Nurses**

**02 October 2026**

**Stock Position – O D negative red cells – risk of move to Amber alert status**

Dear Colleague,

NHSBT's stock of O D negative red cells is lower than we require and is vulnerable to changes in supply and demand.

The pressure on O D negative red cells is due to Ro substitutions. As we have insufficient Ro red cells to meet the needs of sickle cell patients and others with inherited anaemias, we rely on O D negative red cells to meet patient needs.

We are currently only able to collect 50% of Ro demand and O D negative or B D negative red cells are being used as substitutions. 15% of all hospital orders of red blood cells are to treat patients with sickle cell disease. The number of patients needing a red cell exchange has increased and we expect the demand for blood to keep increasing by 7% year on year.

While we are not escalating the stock alert position at this point, there is a risk that we may have to move to Amber. NHSBT and NBTC are asking all hospitals to take action now to avoid impact on NHSBT's ability to supply to orders.

**Please take the following action:**

- 1) Review and reduce your stock holding if safe to do so
- 2) Use appropriate substitutions and use O D positive if safe to do so
- 3) Use O D positive red cells for males, and females over 50, in emergencies where their blood group is unknown.
- 4) Please request Ro if you require this. This will give us a full understanding of demand.
- 5) Please preserve Ro blood for Ro patients. NHSBT can help support setting up stock sharing with other Trusts.
- 6) Refer to [NBTC Pre-Amber guidance](#) 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

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 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 forward this letter to your consultant lead for transfusion and cascade 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

Contact number: 0208 201 3107  
[hospital.blood.co.uk](http://hospital.blood.co.uk) and [nhsbt.nhs.uk](http://nhsbt.nhs.uk)

