ePO53 :Audit of single donor platelet in a tertiary care center in South India

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Introduction

- Transfusion of components derived from human blood underpins modern medicine. Blood component therapy has benefited many patients by meeting their specific transfusion needs from a single blood donation.
- However, despite having various guidelines for platelet transfusion therapy both internationally and nationally, noncompliance to these are frequently seen.
- This inappropriate use occurs as the level of awareness among clinicians varies significantly.
- Unnecessary allogeneic component exposure poses threat to transfusion transmitted infections (TTI), alloimmunization and platelet refractoriness.
- Also ignorance regarding platelet handling, storage, transfusions across ABO and Rh (D) barrier and transfusion triggers has led to wastage of this blood component.

Objectives

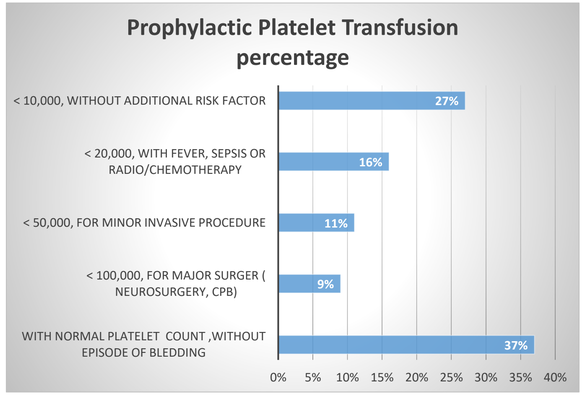
- To asses its preparation, appropriate utilization, and wastage at our Institute

Material & Method

- A six-month retrospective platelet audit was carried out from March to August 2024 in the Department of Transfusion Medicine, at the Institute, which is a tertiary care 250 bedded hospital running various specialties and super-specialties.
- The data for monthly preparation of SDP & Discard data was obtained from departmental records.
- Patient's information regarding their age, gender, specialty, platelet counts, transfusion episodes, therapeutic or prophylactic transfusion and ABO and Rh (D) group specific or non-group specific was obtained from requisition forms and platelet issue record registers

Result

- During 6-month study period, 355 units of SDP were prepared & transfused to 353 patients.
- Adult Critical care unit patient (CCM) & High dependency unit (HDU) were the main user utilizing 39.1 and 78.4 % of SDPs prepared.
- 85 units of (24 %) SDPs transfusions were of group specific platelets only.
- 223 units (63%) of prophylactic platelet transfusions were appropriate as per the recommended BCSH guidelines.



- However, 130 units (37%)of the prophylactic platelets were transfused inappropriately with normal platelet counts and no evidence of bleeding related to platelets.

Conclusion

- **Regular audit** of blood and blood components is a must so that necessary remedial measures can be taken to maximize appropriate and judicious utilization of each component.

Reference

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