## Blood Transfusion Guidelines 2015

There may be situations when the numeric criteria for a transfusion are not met and a transfusion is medically needed. In these cases, the reason for the transfusion should be clearly documented in the chart.

00D CELLS	Contraindications	Do not use to treat anemia that can be corrected with a erythropoietin.	a non-transfusion therapy such as iron or recombinant
		Do not use as a source of blood volume, oncotic pressure, coagulation factors or platelets.	
	Hgb	< 7g.dL or Hct<21%	
		< 8g/dL or Hct<24% with acute coronary syndrome	
		< 8g/dL -chronic transfusions or myelosuppressive therapy / Symptomatic anemia	
		9 - Perioperative anemia with impending major blood loss (based on patient risk)	
PACKED RED BI		Sepsis within first 6 hrs: Target 7-8g/dL	
		8-10g/dL for unstable ischemic heart disease/CAD/critical patients	
	Anemia due to renal failure/hemodialysis refractory to erythropoietin therapy		
	Sickle cell disease - when general anesthesia anticipated, when S & S of anemia are present or for exchange transfusion		
	Active Bleeding	Rapid Blood Loss > 30% of blood volume or 750 cc	
		Systolic BP< 100	Hypovolemia due to surgery, trauma or hemorrhage
		20% fall in BP	rivpovolenna due to surgery, tradina or hemornage
		Pulse > 100 with systolic BP < 90	

PLATELETS	Contraindications		Do not use with autoimmune thrombocytopena or thrombotic thrombocytopenic purpura except for life-threatening hemorrhage. Do not use when plt dysfunction is extrinsic to the plt (uremia, certain types of von Willebrand's disease & hyperglobulinemia)
	Plt count	Non-surgical	< 10,000 < 20,000 - coagulation abnormalities or extensive petechiae or eccchymoses < 20,000 - Pre-op in absence of other coagulopathy <50,000 - Active bleeding
		Surgical	<ul> <li>&lt; 20,000 - Lumbar puncture or fiberoptic bronchoscopy (w/o biopsy) &amp; GI endoscopy w/o biopsy</li> <li>&lt; 80,000 - Pt having epidural spinal anesthesia</li> <li>&lt; 100,000 - Neuro or opthamologic surgery</li> <li>Diffuse microvascular bleeding after CABG &amp; &lt; 100,000 or massive transfusion</li> <li>&lt; 50,000 - Invasive procedure ( CVP placement, paracentesis, thoracentesis, respiratory/GI biopsies, sinus aspiration &amp; dental extaction)</li> <li>&lt; 50,000 - Surgical &amp; obstetrical patients with microvascular bleeding</li> </ul>

FRESH FROZEN PLASMA	Contraindications	Do not use when coagulopathy can be corrected with Vit K.			
	Contraindications	Do not use as a source of blood volume.			
	INR	INR>2 and invasive procedure	Recent/in progress and/or planned		
	Levels	INR>1.7 and neurosurgical procedure	Recent/in progress and/or planned		
		INR>1.5 with significant hemorrhage			
	Bleeding on Warfarin therapy / Emergency reversal - planned procedure				
	Urgent invasive procedure on Warfarin therapy				
	Thrombotic thrombocytopenic purpura				
	Coagulation factor deficiency when no concentrate is available				
	Rare specific plasma protein deficiencies, such as C1 inhibitor				
	After massive blood transfusion	Continued bleed			
	(> 10 units)	Replacement of total blood volume (10 units) within 24 hrs			

PRECIPITA'	Hypofibrinogenemia or dysfibrinogenemia associated with fibrinogen levels < 120 or reduced functional levels of fibrinogen.
	Hemophilia A or Von Willebrand's disease only if appropriate Factor VIII concentrates are not available
	As a fibrin sealant
	Uremic bleeding
	Bleeding in massively transfused patients (10 units within 24 hrs) when the fibrinogen level is < 100
	Factor XIII deficiency (for bleeding & pre-operative prophylaxis)

