HPM.1.3 Report Adverse Transfusion Events

Procedure Area: Hospital Patient Management (HPM)	Version: 2.0

Purpose

To report adverse transfusion events.

Scope

Customers

Materials

- ✓ *Transfusion Reaction and Adverse Event* form

Procedure Notes

- Your facility is responsible for performing all lab work associated with a suspected bacterial contamination (i.e., Gram stains and cultures); provide all findings.

Procedure Steps

1. Confirm the adverse event is reportable; refer to the types of suspected adverse events listed on the *Transfusion Reaction and Adverse Event* form and the criteria included in the ***NHSN Biovigilance Component Hemovigilance Module Surveillance Protocol***. If you are unsure whether the adverse event is reportable, contact the Medical Office using the numbers listed on the *Transfusion Reaction and Adverse Event* form.
2. If adverse event is reportable, perform the following:
   a. Complete your facility's transfusion reaction workup report form and the *Transfusion Reaction and Adverse Event* form.
   b. Fax your facility's transfusion reaction workup report form, any supporting documentation, and the *Transfusion Reaction and Adverse Event* form.
   c. Verify fax receipt using the confirmation number provided on the *Transfusion Reaction and Adverse Event* form.

Related Documents

- NHSN Biovigilance Component Hemovigilance Module Surveillance Protocol

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Version History

#	Significant Changes	Approved by	Approved	Implemented
2.0	• Updated instructions for reporting adverse transfusion events to include *Transfusion Reaction and Adverse Event* form. • Removed references to discontinued forms.	Dr. Juan Merayo-Rodriguez, Medical Director Dr. Chris Lough, VP of Medical Services Lori Masingil, VP of Quality	25 Mar 2020	07 Apr 2020
1.0	• Added supplementary report forms for reporting adverse events and included instructions for which form to use based on type of suspected event. • Added a procedure note explaining that the facility is responsible for performing all lab work associated with a suspected bacterial contamination (i.e., Gram stains and cultures) and for providing all findings. • Removed investigation criteria table; added step to refer to the criteria listed in the *National Healthcare Safety Network Biovigilance Component Hemovigilance Module Surveillance Protocol*. • Made minor updates to steps for faxing documents and verifying fax receipt. • Added version information. ***Note**: Prior versions of this document may exist; version numbers were applied to policies and procedures beginning in ~Jan. 2015.*	Dr. Juan Merayo-Rodriguez, Medical Director Dr. Marek Fried, Medical Director Matt Audette, QA Manager CBCC Medical Director	17 Jul 2015	04 Aug 2015