

ILumens Protocol

MANAGEMENT OF A TRANSFUSIONAL INCIDENT BY BACTERIAL CONTAMINATION OF LABELED BLOOD PRODUCTS

The transfusion event results in the occurrence of adverse effects in a recipient of LAS (Red Blood Cells), Platelet Concentrates (CP) and / or Fresh Frozen Plasma.

Infectious side effects have been caused by bacterial contamination.

The causes are diverse:

- At the time of the donor's collection (contamination of the sampling equipment, insufficiency in aseptic measurements, transient bacteraemia of the donor, etc.);
- When handling the PSL;
- In case of breakage of the cold chain;
- In case of poor storage conditions of PSL;
- In case of bad defrosting of PFCs;
- In case of defective pockets.

Initial evaluation

The transfusion incident must be evoked in the presence of one of these criteria within 90 minutes after the start of the transfusion:

- Temperature > 39 ° C or increase of basal temperature by 2 ° C
- Chills,
- Tachycardia > 120 / min or increase in basal heart rate > 40 / min
- Increase or decrease in systolic blood pressure > 30 mm Hg

A state of shock can occur at the same time, it associates:

- A tachycardia, - Oliguria,
- Hypotension, - mottling,
- A polypnea, dyspnea, - Hyper or hypothermia,
- Digestive signs: nausea, vomiting, diarrhoea,
- Pain: vertebral, abdominal, thoracic,...

CONDUCT TO BE CAREFUL IMMEDIATE BY THE CAREGIVER

- IMMEDIATE STOP OF THE TRANSFUSION, but keep the venous approach by changing the tubing with an isotonic solute.
- Keep the PSL bag with the tubing involved. Isolate them in an airtight bag and store them at + 4 ° C until they are sent to the laboratory for analysis of the incriminated product according to the procedure validated by the correspondent hemovigilance of the establishment.
- Doctor's call.
- Information of hemovigilance correspondents to block blood products from the same donation.
- Scoped patient: vital parameters measured every 5 minutes (pulse, blood pressure, oxygen saturation and respiratory rate).
- Temperature monitoring.
- Evaluation of the state of consciousness of the patient,
- Evaluation of the patient's pain (EVA),
- Verification of the permeability of the infusion,

The caregiver should note all the vital parameters in order to transmit the information to the doctor.

Medical intervention

In front of one of the criteria mentioned above, the medical staff must call on the doctor.

The doctor will then prescribe:

- Blood cultures: two to one hour apart.
- Probabilistic antibiotic therapy.
- Treatment of the state of shock.

Nurse supervision

It is recommended:

- ✓ Monitor vital parameters continuously;
- ✓ Record vital parameters on the monitoring sheet every 10 minutes;
- ✓ Monitor body temperature on a regular basis;
- ✓ Note the presence of chills on the monitoring sheet;
- ✓ Monitor the permeability of the venous route.