

Clinical Symptoms & Signs: fever, chills, rigors, tachycardia, hyper/hypotension, collapse, flushing, urticaria, respiratory distress, nausea, malaise, pain (bone, muscle, chest, abdominal)

STOP TRANSFUSION (UNLESS HAEMORRHAGING): ARE THE SIGNS/SYMPTOMS LIFE THREATENING?

YES – SEVERE reaction

DISCONTINUE TRANSFUSION
EMERGENCY CALL (2222)
START RESUSCITATION
MONITOR VITAL SIGNS, O₂ SATURATION, URINE OUTPUT

Contact Haematology consultant for advice

anaphylaxis/
severe allergy

non-anaphylactic
respiratory compromise

suspected bacterial
contamination of unit

suspected acute haemolytic
transfusion reaction

Retain blood unit (s), report to transfusion laboratory, commence diagnostic investigations

NO

MODERATE

≥39 ° C (or ≥2 ° C rise)
Symptoms/signs other than pruritus/rash

Contact Haematology consultant for advice

Mild

<39 ° C (or <2 ° C rise)
With or without pruritus/rash

INFORM MEDICAL STAFF

Take into account underlying clinical condition

Consider symptomatic treatment
If symptoms settles, **resume transfusion**
More frequent monitoring of vital signs

Continue transfusion
Consider symptomatic treatment
More frequent monitoring of vital signs

If symptoms and signs are determined **not transfusion-related**, or in the case of **mild reaction**; document in medical notes

Worsening/persistent symptoms out of keeping with underlying condition – manage for Severe reaction

Worsening – manage as for Moderate/Severe reaction

Initial samples required

- **1x 6mL Pink top EDTA**
 - Post transfusion Group and Screen
 - DAT
- **1x 6mL Yellow top Serum**
 - UE
 - LFT
 - Haptoglobin
 - LDH
- **1x 4mL Purple top EDTA**
 - FBC
- **1x 4mL Blue top Citrate**
 - Clotting Screen