

NATIONAL QUESTIONNAIRE FOR HEMOVIGILANCE

OCTOBER 2015

VERSION 1

CODE: LCBT-HV 008

TRANSFUSION ACTIVITIES DOCUMENTS

NATIONAL QUESTIONNAIRE FOR BLOOD TRANSFUSION CENTERS IN LEBANON

Institution (name, address): Phone:

Supervisor (Surname, First name): Email:

This questionnaire was prepared by the National Committee for Blood Transfusion and Haemovigilance to collect blood transfusion quality indicators for 2015 and the necessary data for the establishment of a haemovigilance system.

All questions below relate to your data for the year 2015.

Please answer all the questions as precisely as possible.

List of acronyms

BTC: Blood Transfusion Center

LBP: Labile Blood Products

PRBCs: Packed Red Blood Cells

APCs: Apheresis Platelet Concentrates

FFP: Fresh Frozen Plasma

TTIs: Transfusion-Transmissible Infections

Donors and blood collection

1. Do you have a budget for donor recruitment? Yes No
2. Do you have a donor retention strategy? Yes No
3. Total and percentage of blood products from outside the hospital?

| | Number | | | | Percentage | | | |
|------------------|-------------|-------|------|-----|-------------|-------|------|-----|
| | Whole Blood | PRBCs | APCs | FFP | Whole Blood | PRBCs | APCs | FFP |
| From another BTC | | | | | | | | |

4. Number of donors who donated whole blood or apheresis platelets during the year.
(excluding autologous donors)

| | Whole Blood | Apheresis platelets | Total |
|--|-------------|---------------------|-------|
| Number of unpaid voluntary donors | | | |
| Number of family donors / replacement donors | | | |
| Total number of donors | | | |

Attention! Donors who repeatedly donate are only counted once.

5. Number of whole blood or apheresis platelet donations during the year, by donation type:
(excluding autologous donors)

| | Whole Blood donation | Apheresis platelet donations | Total |
|---------------------------------|----------------------|------------------------------|-------|
| Unpaid voluntary donations | | | |
| Family or replacement donations | | | |
| Total number of donations | | | |

Attention! All donations should be accounted for, even if from a single donor.

6. Number of potential whole blood or apheresis platelet donors excluded:

| | |
|--|--|
| Number of donors temporarily excluded: (after the interview, clinical examination, blood count) | |
| Number of donors permanently excluded: | |
| <ul style="list-style-type: none"> Number of donors excluded (after the interview, clinical examination, blood count) Number of donors excluded for positive serology (this section is reserved for centers conducting anti-HBc testing before donation) | |
| Total number of excluded donors | |

7. Number of potential whole blood or platelet donors excluded, by cause of exclusion :

| Contraindications | Number |
|--|---------------|
| Underweight donor | |
| Blood pressure, unusual pulse | |
| Low hemoglobin and/or hematocrit levels (please specify) | |
| Other biological contraindications (white blood cells, platelets...) | |
| Risky sexual behavior | |
| Surgery, tattoo, piercing, endoscopy... | |
| Infection, flu.... | |
| Chronic disease | |
| Visit to an endemic area | |
| History of hepatitis, AIDS, syphilis.... | |
| Recent vaccination | |
| Dental problems | |
| Other | |
| Positive serology (this section is reserved for centers conducting anti-HBc testing before donation) | |
| Total number of rejected donors | |
| % of rejected donors | |

Attention! The total number of rejected donors should match the total number of excluded donors in question 6.

8. Donor breakdown by gender:

| | Whole blood donations | Apheresis platelet donations |
|---------------|------------------------------|-------------------------------------|
| Male donors | | |
| Female donors | | |

9. Donor breakdown by age. Number of donors by age group having donated whole blood or apheresis platelets

| Donors: | Whole blood donations | Apheresis platelet donations |
|--------------------|------------------------------|-------------------------------------|
| 18 to 24 years | | |
| 25 to 44 years | | |
| 45 to 64 years | | |
| 65 years and above | | |

10. Number of autologous blood donations before surgery:

Screening for transfusion-transmissible infections:

11. What are the methods and markers used for the screening of transfusion-transmissible infections?

| | Method | Marker |
|-----------|--------|--------|
| HIV | | |
| HBSAg | | |
| HBc Ab | | |
| Anti -HCV | | |
| Syphilis | | |

12. In case of reactive serological results for transfusion-transmissible infections, do you seek confirmation of the result?

Yes No

13. If yes, confirmation is carried out by :

| | Yes | No |
|--------------------------------|-----|----|
| Western Blot (HIV) | | |
| RIBA (HCV) | | |
| Neutralization (HBsAg) | | |
| Viral genomic diagnosis or PCR | | |
| Other | | |

14. Is there a notification system in place for?

| | Yes | No |
|----------------------------------|-----|----|
| Results of HIV testing | | |
| Results of hepatitis B screening | | |
| Results of hepatitis C screening | | |
| Results of syphilis screening | | |
| Other (define) | | |

15. Is there a post-donation counseling and follow-up system in place for donors with positive serology for transfusion-transmissible infections?

Yes No

16. Prevalence (number and percentage) of syphilis infections in blood and platelet donations:

| | Number | Percentage |
|----------|--------|------------|
| Syphilis | | |

17. Prevalence (number and percentage) of HIV infections in whole blood and apheresis donations:

| | Number | Percentage |
|-----------------------|--------|------------|
| Whole blood donations | | |
| Platelet donations | | |

18. Prevalence (number and percentage) of HBV infections in whole blood and apheresis donations.

| | Number | Percentage |
|-----------------------|--------|------------|
| Whole blood donations | HBSAg | |
| | HBcAb | |
| Platelet donations | HBSAg | |
| | HBcAb | |

Attention ! Serology of HBc antibodies conducted before the donation must also be included in this table

19. Prevalence (number and percentage) of HCV infections in whole blood and apheresis donations.

| | Number | Percentage |
|-----------------------|--------|------------|
| Whole blood donations | | |
| Platelet donations | | |

Preparation of blood components

20. Number and percentage of whole blood donations separated into different components:

| Number of whole blood donations separated into different components | Percentage |
|---|------------|
| | |

21. Number of blood components units prepared from whole blood donations:

| | Number |
|---------------------------------|--------|
| Packed Red Blood Cells | |
| Apheresis Platelet Concentrates | |
| FFP | |

22. Number of blood components units prepared from apheresis:

| | |
|---------------------------|--|
| Apheresis red blood cells | |
| Apheresis platelets | |
| Apheresis plasma | |

23. Number of whole blood/packed red blood cells donations that were rejected for the following reasons:

| | |
|--|--|
| Insufficient volume sampling | |
| Transfusion-transmissible infection | |
| Expired units | |
| Immuno-hematologic problems (group,coombs,...) | |
| Preservation issues | |
| Transportation issues | |
| Preparation issues | |
| Total | |

Clinical use of blood and its components

24. Number of blood and blood component units delivered / transfused (excluding autologous blood units)

| | |
|------------------------|--|
| Whole blood | |
| Packed Red Blood Cells | |
| Platelet concentrates | |
| FFP | |
| Cryoprecipitates | |

25. Number and percentage of whole blood or packed red blood cells donations:

| | | Number | % |
|--|---------------------------------|--------|---|
| Units of whole blood or PRBCs, with Leukocytes Reduced | Leukoreduced at the BTC | | |
| | Leukoreduced at the patient bed | | |
| Units of whole blood or PRBCs, not leukoreduced | | | |
| Total of distributed units | | | |

26. Number of adverse transfusion reactions reported during the year:

| | |
|---|--|
| Immunological haemolysis due to ABO incompatibility | |
| Immunological haemolysis due to other alloantibodies | |
| Non-immunological haemolysis | |
| Post-transfusion purpura | |
| Allergy / Anaphylaxis / hypersensitivity | |
| Reactions, shivers, hyperthermia | |
| Transfusion-Related Acute Lung Injury (TRALI) | |
| Graft-versus-host disease | |
| Transfusion-associated HIV1/2 infection | |
| Transfusion-associated HBV infection | |
| Transfusion-associated HCV infection | |
| Septic shock from bacterial contamination of the donor unit | |
| Transfusion-associated malaria | |
| Other transfusion-associated parasitic infection | |
| Transfusion-associated circulatory overload | |
| Metabolic reaction | |
| Other | |

27. Do you have an information system for your blood bank?

Yes No

28. If yes, what is it?

.....

.....

.....

Date:

Signature:

Glossary

Apheresis: Operation that involves blood collection, ex vivo separation and collection of the desired components (red blood cells, plasma or platelets, for example) and reinjection of the other components.

Transfusion center: Establishment conducting some or all of the activities for the recruitment of donors, collection of blood (whole blood and, in some cases, collection by apheresis), screening for transfusion-transmissible infections, blood grouping, processing of blood components, storage and distribution of blood and blood components to hospital blood banks within a defined region, in conjunction with clinical services

Blood donors

- Unpaid voluntary donor: A person who donates blood (and plasma or cellular components) voluntarily and receives no payment in return, either in cash or in any other form that can be considered a money substitute.
- Family replacement donor: A person who gives a replacement unit of blood only when a family member or friend needs a transfusion.
- Autologous donor: A patient who donates blood to be stored and reinfused, if needed while he/she undergoes surgery.

Fresh Frozen Plasma (FFP): A blood component prepared from whole blood or from plasma collected by apheresis, frozen to a certain temperature to maintain clotting factors in their functional state.

Serious adverse transfusion reaction: A response or adverse reaction in a patient, related to the administration of blood or blood components, that is fatal or life-threatening, leading to a handicap or disability, or leading to prolonged hospitalization or to morbidity.

