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Implementation: To be determined by each Service

Change Notification UK National Blood Services No. 10 - 2009

Testing of neonatal deceased tissue donors

Applies to the Guidelines for the Blood Transfusion Services in the United Kingdom – 7th Edition 2005

Addendum 2007 – Replacement Chapters 21 to 24 Human Tissues and Cells

22.7 Testing of deceased donors

Please delete the last paragraph

“Where the deceased donor is less than 18 months of age a maternal sample must be tested as well as an infant sample. Maternal samples are also required in the case of older children who have been breast fed within the 12-month period prior to donation. The maternal sample will be tested as for a living donor whilst the infant’s sample should be tested as for a deceased donor (see Table 22.1).”

Replace with

“Where the deceased donor is less than 18 months of age a maternal sample must be tested. Maternal samples are also required in the case of older children who have been breast fed within the 12-month period prior to donation. The maternal +/- infants samples are tested as follows:-

- Stillbirths and deaths within 48 hours of birth require full microbiology screening on a current maternal sample.
- Deaths between 48 hours and 28 days after birth, where there has been no identifiable transmission or intervention risk, require full microbiology screening on a current maternal sample.
- Deaths between 48 hours and 28 days, where there are identifiable risks of transmission, require full microbiology testing of the maternal sample and NAT testing of the neonatal sample.
- Deaths more than 28 days after birth require full microbiology screening for both the infant and maternal samples.

The maternal sample will be tested as for a living donor whilst the infant’s sample should be tested as for a deceased donor (see Table 22.1).”

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Additional information

It is often not possible to obtain adequate blood samples from neonatal deceased tissue donors for the normal full microbiological testing regimen. The EC Tissue and Cells Directive allows for testing of maternal samples only for all neonatal donors but does not take into consideration possible additional postnatal risk factors. These changes are a balanced approach to testing that should continue to ensure tissue safety whilst allowing for the problem of obtaining adequate neonatal blood samples.

The supporting paper, JPAC 08-67 Consideration for Change to Red Book Regarding Testing of Neonatal Deceased Tissue Donors from SACT, leading to this Change Notification can be found in the Document Library/Supporting Papers of the JPAC website:

<http://www.transfusionguidelines.org.uk/Index.aspx?Publication=DL&Section=12&pageid=7528>.

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