REINFUSION OF SALVAGED BLOOD

AREA of APPLICATION

Reinfusion of cell salvaged blood should follow standard blood transfusion practice. The responsible clinician must authorise the cell salvaged blood for reinfusion in the same manner as for allogeneic (donor) blood.

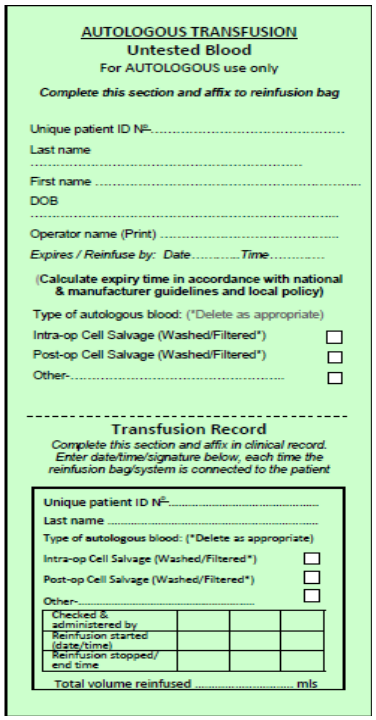
STAFF

All staff involved in the cell salvage process.

PROCEDURE:

Labelling

The reinfusion bag must be labelled with the patient's first name, last name, unique patient identification number, date of birth and the expiry time of the salvaged blood. These details must be handwritten, from the details on the patient's identification band, onto an autologous transfusion label (such as the one opposite) and attached to the reinfusion bag as soon as is practicably possible. Adressograph labels should not be used because of the known associated risks[1]



AUTOLOGOUS TRANSFUSION
Untested Blood
For AUTOLOGOUS use only
Complete this section and affix to reinfusion bag

Unique patient ID N°.....
Last name .....
First name .....
DOB .....
Operator name (Print) .....
Expires / Reinfuse by: Date.....Time.....
(Calculate expiry time in accordance with national & manufacturer guidelines and local policy)
Type of autologous blood: (*Delete as appropriate)
Intra-op Cell Salvage (Washed/Filtered*) ☐
Post-op Cell Salvage (Washed/Filtered*) ☐
Other-..... ☐

Transfusion Record
Complete this section and affix in clinical record. Enter date/time/signature below, each time the reinfusion bag/system is connected to the patient

Unique patient ID N°.....
Last name .....
Type of autologous blood: (*Delete as appropriate)
Intra-op Cell Salvage (Washed/Filtered*) ☐
Post-op Cell Salvage (Washed/Filtered*) ☐
Other-..... ☐

Checked & administered by			
Reinfusion started (date/time)			
Reinfusion stopped/ end time			

Total volume reinfused ..... mls

Reinfusion

Red cells salvaged intraoperatively must not be stored in a refrigerator and should be kept with the patient at all times. Reinfusion should be in accordance with local policy and the American Associated of Blood Banks guidelines[2] which state that red cells salvaged intraoperatively (washed systems), expire four hours from the completion of processing.

Some devices can be used intraoperatively and continue to salvage postoperatively from drains. In this case, the red cells salvaged intraoperatively should be reinfused within four hours of processing and the red cells salvaged in the postoperative period should be reinfused within six hours from the start of the postoperative collection. The two separate expiry times should be recorded on the label.

Red cells salvaged intraoperatively should be given back to the patient using a filter to remove harmful components. A blood administration set containin a 200μm filter is suitable in most cases, however, other filters may be appropriate for certain specialities (see ICS Technical Factsheet *Number 7 – Use of Filters*).

Cell salvage manufacturers advise that a pressure cuff should NOT be used during reinfusion of cell salvaged blood as there is a risk of air embolus from the air in the reinfusion bag (refer to manufacturers protocols). Some devices may also detect a back pressure if the reinfusion line is open.

REFERENCES

1. British Committee for Standards in Haematology (2009) Guideline on the Administration of Blood Components http://www.bcshguidelines.com/documents/Admin_blood_components_bcsh_05012010.pdf (accessed 21.09.2015).

2. American Association of Blood Banks (AABB) (2013) Standards for Perioperative Autologous Blood Collection and Administration (5th Edition)