

POTENTIAL SIGNS / SYMPTOMS

- Fever / chills / rigors
- Tachycardia
- Respiratory distress
- Hyper / Hypotension

- Syncope
- Nausea / General Malaise
- Flushing / Urticaria
- Pain: Chest / Abdominal / Muscles

STOP TRANSFUSION

ABCDE ASSESSMENT

SERIOUS / LIFE THREATENING CLINICAL FEATURES

- Airway compromise
- Respiratory distress
- Cardiovascular instability
- Anaphylaxis
- Evidence WRONG BLOOD
- Evidence CONTAMINATED BLOOD

MANAGEMENT

- Oxygen maintain $\text{SaO}_2 > 94\%$

INVESTIGATE / MONITOR

- Full set observations
- 12 Lead ECG
- Cardiac Monitoring
- IV Access

CHECK BLOOD PRODUCT

- Patient ID
- Blood compatibility label
- Turbid
- Clots
- Discolouration

YES

NO

DISCONTINUE TRANSFUSION

CALL SENIOR
GET CRASH TROLLEY

SIGNS / SYMPTOMS

- Wheeze / Stridor
- Swelling
- Urticaria
- Pain
- Hypotension
- Syncope

ANAPHYLAXIS

ANAPHYLAXIS MANAGEMENT

- Fever
- Rigors
- Tachycardia
- Hypotension
- Pain
- SOB

ABO INCOMPATIBILITY

IV FLUID RESUSCITATION

BACTERIAL CONTAMINATION

SEPSIS 6

- Acute SOB
- Hypoxia
- Tachycardia

TACO

Transfusion associated circulatory overload

FLUID OVERLOAD MANAGEMENT

TRALI

Transfusion related acute lung injury

DISCUSS WITH SENIOR

CLINICAL FEATURES

TEMP $\geq 39^\circ\text{C}$
-or-
 $\geq 2^\circ\text{C}$ RISE
-and / or -
OTHER SYMPTOMS

DISCONTINUE TRANSFUSION

- Consider symptomatic treatment
- Monitor patient regularly

CALL SENIOR

ISOLATED TEMP $38-39^\circ\text{C}$
-or-
 $< 2^\circ\text{C}$ RISE
-or-
PRURITIS / RASH ONLY

CONTINUE TRANSFUSION

- Consider slower rate of infusion
- Consider symptomatic treatment
- Monitor patient regularly

DISCUSS WITH SENIOR

FURTHER INVESTIGATION

- Bloods:
 - FBC / U&E / LFT
 - Clotting / Group and Save
- Serial Mast Cell Tryptase:
 - 0 / 3 / 24 hours
- Blood cultures (if sepsis)
- CXR (if SOB)

- Inform Haematology of any Serious / Life Threatening features
- Or if transfusion had to be discontinued