



# BBH UPDATE

March 18, 2014

## C O M P L I A N C E   A L E R T

### TRALI (TRANSFUSION-RELATED ACUTE LUNG INJURY) RISK REDUCTION FACT SHEET

TRALI remains the most common cause of transfusion-related death reported to the Food and Drug Administration (FDA). In 2012, TRALI accounted for 17 of 38 (45%) reported transfusion-related fatalities.

TRALI-risk reduction strategies will now be part of the upcoming edition of the 29<sup>th</sup> edition of the AABB Standards for Blood Banks and Transfusion Services scheduled to be effective April 1, 2014.

The new **Standard 5.4.1.2** states:

“Plasma and whole blood for allogeneic transfusion shall be from males, females who have not been pregnant, or females who have been tested since their most recent pregnancy and results interpreted as negative for HLA antibodies.”

For improved patient safety, Blood Bank of Hawaii (BBH) will also implement TRALI risk-mitigation strategies for apheresis platelets, although a phased approach may be necessary.

BBH TRALI risk mitigation strategies are as follows:

- Plasma, all blood types, will be from:
  - Male donors
  - Never-pregnant female donors
  - Female donors with a history of pregnancy who have been tested and found negative for HLA antibodies
  
- Apheresis platelets (phased in) will be from:
  - Male donors
  - Never-pregnant female donors
  - Female donors with a history of pregnancy who have been tested and found negative for HLA antibodies

The Donor History Questionnaire will be revised to capture the necessary information and procedures updated to operationalize the new strategies. Testing for HLA antibodies will be performed by the Clinical Immunogenetics Laboratory at Clinical Laboratories of Hawaii.

We expect this change will be transparent to our hospitals with minimal impact on BBH's ability to supply blood components. The changes will result in no additional cost to our customers.



**Blood Bank of Hawaii**  
*Give Blood. It's Safe. It's Simple. It Saves Lives.*