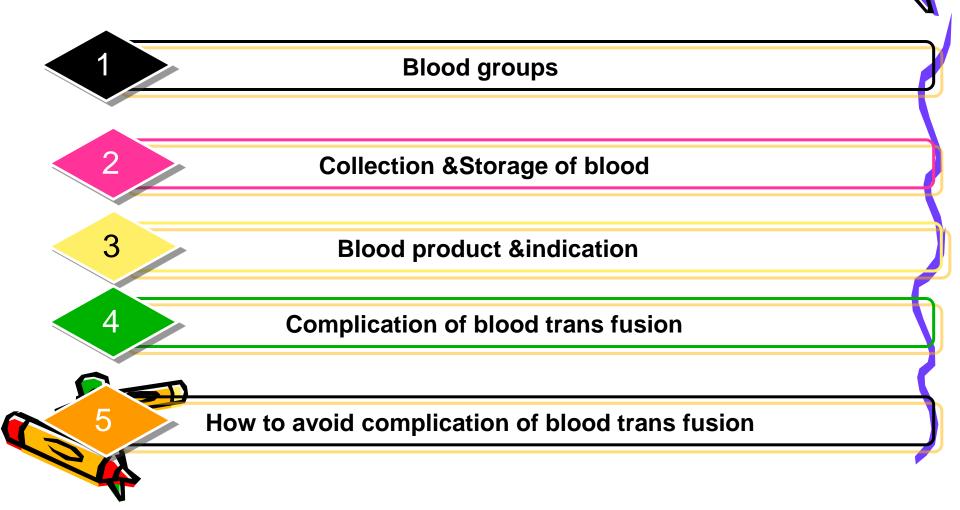
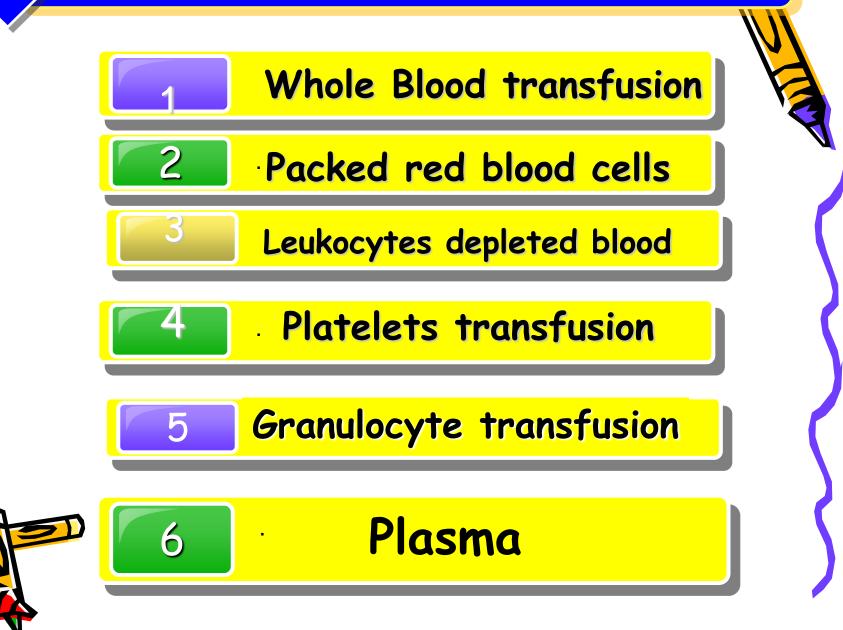
Contents



Type of blood transfusion

2





GUIDELINES FOR USE OF BLOOD COMPONENTS

Transfusion Indication	Options	Desired Effect	Preference	Reasons
To Increase . HB%	 Packed Red Cells In Additive Solution (PCV) 	Hb by 1 g% HCT by 3%	×	 -Least chances of transfusion reactions as total plasma is removed. -Viability of RBCs is better. -Platelets and Plasma can be utilised for another patient.
	2. Whole Blood (WB)	Hb by 1 g% HCT by 3%	~	-More chances of transfusion reactions due to plasma proteins. -It is like unnecessary multidrug therapy.
To Replace Blood Loss	1. PCV	As per volume of PCV	× ×	- If you want to replace blood loss less than two liters.
	2. Whole Blood	As per volume of WB	V V	- If you want to replace blood loss more than two liters quickly.
To Increase Platelet Count	1. Single Donor Platelets (SDP)	Increases Platelet count by 50,000- 70,000/ml per unit	~ ~	-Recipient is exposed to single donor. -Leucoreduced platelets are obtained so risk of transfusion reaction and platelet refractoriness is reduced.
	2. Random Donor Platelets (RDP)	Increases Platelet count by 5,000- 8,000/ml per unit	~	-Recipient is exposed to many donors. -Risk of alloimmunization and so platelet refractoriness -Chances of transfusion reaction are more as leucoreduction is not always possible.





Whole Blood transfusion:



Storage life :2-5 w

The main indications are:

- 1. Acute hemorrhage external or internal.
- Operative and post-operative replacement.
- 3. Severe burn.
- 4. Intestinal strangulation.
- 5. Raising the resistance to sepsis.
- 6. Exchange transfusion in cases or erythroblastosis fetalis.

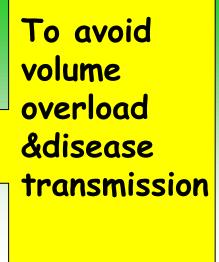




. Packed red blood cells:

The main indications are:

- Chronic anemias
- Renal & liver diseases
- · Eldery





CENTRIFUGE

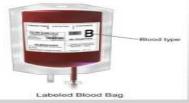
Whole

Blood

Packed red blood cells

Plasma

Packed **Red Cells**



Leukocytes depleted blood



The main indications are :-

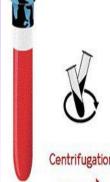
- Chronic hemolytic anemia
- Bone marrow transplantation
- immune deficiency states
- Chronic renal failure



Platelets transfusion:



- Thrombocytopenia (1ry&2ry)
- Platelet dysfunction disorders
- Platelets prepared as form of: -
- Fresh platelet rich plasma.



Platelet poor plasma

Platelets Cell seperator gel Red blood cells concentrate

- Pooled platelets (from multiple donors)
- Platelets concentrate by platelet-phersis.
- Storage life 2-5d
- Platelets in one unit of blood increases the circulating number of platelets between 10.000-15.000/ul