

## IRRADIATED BLOOD PRODUCTS ALERT FORM

Surname		Given Names		
DOB	Sex	Patient Number (NHI)		
Ward		Consultant		
Relevant Clinical Details				

Please supply irradiated blood products to the above patient.

Doctor's Signature: \_\_\_\_\_ Name: \_\_\_\_\_

Date: \_\_\_\_\_ Please review this instruction in \_\_\_\_\_ months time.

Transfusion associated graft-versus-host disease (GVHD) is a rare complication, most often seen in severely immunocompromised patients.

It may also occur in immunocompetent people exposed to blood from a donor with a similar HLA type, involving an HLA match known as a "homozygous haplotype". In this condition blood donor lymphocytes which are viable and immunocompetent engraft in the bone marrow of the patient. This causes an immune response in which proliferating donor lymphocytes recognise a host/patient tissue as foreign, causing an immune rejection reaction.

At risk groups include:

- HSCT recipients: ALLO and AUTO
- Patients with immune suppression induced by purine analogues (eg; fludarabine, cladribine)
- Patients with Hodgkin's disease

Other risk groups:

- Congenital immunodeficiencies (eg; Downs syndrome),
- Low birth weight neonates (<1200gm)
- Dedicated donations (from first or second degree relatives)
- Intrauterine transfusions/neonatal exchange transfusions
- HLA matched single donor platelets.

Prevention is by irradiating cellular blood products to at least 25Gy.

Leukodepletion blood is not suitable for this purpose.

For further details please refer to the Transfusion Medicine Guidelines on the Canterbury DHB IntraNET located under: Clinical Info, Transfusion Medicine, Guidelines, Irradiated Blood Products Guidelines, view guidelines.

**Please fax this form to Blood Bank on 80159 (364 0159) and retain original copy in the patient notes.**  
 NZ Blood Service contactable on ext 80310 (364 0310).