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PURPOSE:

To outline the steps in testing for transfusion transmissible infections to ensure that all blood products are negative for the five (5) transfusion transmissible infections prior to transfusions

SCOPE:


Applies to all Blood Bank Section Staff of Laboratory Department of Dr. Pablo O. Torre Memorial Hospital (DPOTMH)

PERSON RESPONSIBLE:

Medical Technologists

GENERAL GUIDELINES:

- 1 For the purpose of this SOP, the Transfusion Transmissible Infections term is defined as infections resulting from the introduction of a pathogen into a person through blood transfusion. A wide variety of organisms, viruses and parasites can be transmitted through blood transfusions.
- 2 All whole blood and apheresis donations shall be screened for evidence of the presence of infection prior to the release of blood and blood components for clinical or manufacturing use.
- 3 Screening of all blood donations shall be mandatory for the following infections and using the following markers:
 - 3.1 HIV-1 and HIV-2: screening for either a combination of HIV antigen-antibody or HIV antibodies
 - 3.2 Hepatitis B: screening for hepatitis B surface antigen (HbsAg)
 - 3.3 Hepatitis C: screening for either a combination of HCV antigen - antibody or HCV antibodies
 - 3.4 Syphilis (*Treponema pallidum*): screening for specific treponemal antibody


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3.5 Malarial Antibody or smear : Screening for the presence of malarial parasites


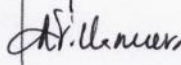


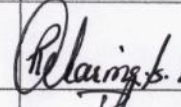


- 4 Screening shall be performed using highly sensitive and specific assays that have been specifically evaluated and validated for blood screening.
- 5 Only blood and blood components from donations that are nonreactive in all screening tests for all markers shall be released for clinical or manufacturing use.
- 6 All screen reactive units shall be clearly marked, removed from the quarantined stock and stored separately and securely until they are disposed of safely.


PROCEDURE:

1. Medical technologist performs pre-counseling prior to blood extraction.
2. Medical technologist draws blood sample from the donor and screens for five (5) Transfusion Transmissible Infections: HBs Antigen, Anti-HCV, Anti-HIV, Syphilis and malarial antibody.
3. If the donor tested **nonreactive** to five TTIs, medical technologist proceeds with cross-matching and bleeding.
4. If the donor tested **reactive** to one of the five TTIs, medical technologist defers the donor and informs him/her of the result. Medical technologist shall prepare the donor's sample and forms needed for send out to RITM-NRL for confirmatory testing.


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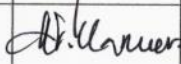


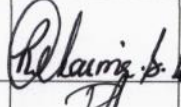


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Verified by:	MONICA B. VILLANUEVA, RN, RMT, PhD Laboratory Manager		7-7-2022
	MELANIE ROSE B. ZERRUDO, MD, FPSP Chair, Department of Pathology		7-7-2022
Reviewed by:	DENNIS C. ESCALONA, MN, FPSQua Quality Assurance Supervisor		7-07-2022
Recommending Approval by:	ROSARIO D. ABARING, MAN, PhD Ancillary Division Officer		07-07-2022
	FREDERIC IVAN L. TING, MD OIC - Total Quality Division		7-8-22
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KEY TASK	PERSON RESPONSIBLE
1. Performs pre-counseling prior to blood extraction.	Medical Technologist
2. Draws blood sample from the donor and screens for five (5) Transfusion Transmissible Infections: HBs Antigen, Anti-HCV, Anti-HIV, Syphilis and malarial antibody.	
3. Proceeds with cross-matching and bleeding if the donor tested nonreactive to five TTIs.	
4. Defers the donor and informs him/her of the result if tested reactive to one of the five TTIs.	

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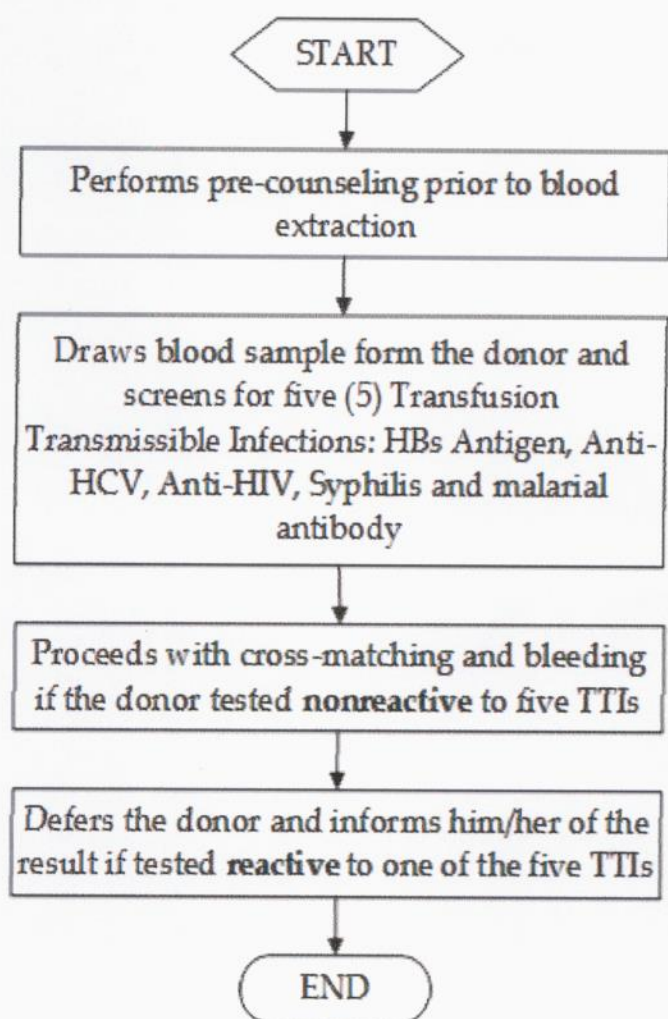



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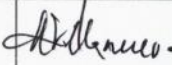


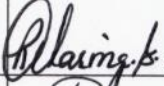


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FLOWCHART



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