



**LEGACY
LABORATORY
SERVICES**

Legacy Transfusion Guidelines and Audit Criteria for Adults

All transfusions are subject to quality assurance review. Guidelines have been established by the Transfusion Committee and approved by the Medical Staff and do not constitute indications or triggers for transfusion. Specific clinical situations may dictate practices that differ from review criteria. The guidelines are based on current literature and are reviewed and modified as new data becomes available.

Red Blood Cells	1. Hemoglobin/Hematocrit levels of 7.0 g/dL or 21% for general medical and surgical patients in the absence of risk factors for cardiac ischemia 2. Hemoglobin/Hematocrit levels of 8.0-10.0 g/dL or 24-30% a. Symptomatic euvolemic patients (e.g. angina, syncope, CHF, TIA, dyspnea) b. Stable patients with risk factors for cardiac ischemia 3. Acute blood loss of 15% of estimated blood volume 4. Pre-operative hemoglobin less than 9 g/dL with expected blood loss >500 mL 5. ECMO or exchange transfusion
Autologous Whole Blood or Packed Cell	1. Pre-operative hemoglobin less than 9 g/dL with expected blood loss >500 mL. 2. Hemoglobin/Hematocrit levels of 10g/dL or 30%.
Platelets	1. Platelet count less than 5,000-10,000 in a non-bleeding patient with failure of platelet production 2. Platelet count less than 20,000 in a non-bleeding patient with failure of platelet production and risk factors (e.g. sepsis, fever, coagulopathy, etc.) 3. Platelet count less than 50,000 with impending surgery or invasive procedure 4. Platelet count less than 100,000 and: a. Trauma/massive transfusion b. CNS or ocular surgery c. Major surgery with bleeding 5. Treatment with certain antithrombotic/anticoagulant agents (e.g. Plavix) 6. Diffuse microvascular bleeding and no platelet count available 7. Bleeding in patient with qualitative platelet function defect
Frozen Plasma or Fresh Frozen Plasma	1. PT INR greater than 1.5, aPTT greater than 60 seconds, or factor assay less than 25% and active bleeding, or anticipated major surgery/invasive procedure within 24 hours 2. Diffuse microvascular bleeding and PT/PTT not available 3. Plasma exchange in TTP/HUS or cryo-poor FP 4. Protein C, protein S, or ATIII deficiency if purified concentrate not available 5. Initial stabilization on ECMO circuit 6. Emergency reversal of bleeding associated with Coumadin, TPA, Streptokinase, Urokinase, etc.
Cryoprecipitate	1. Hypofibrinogenemia (fibrinogen less than 100 mg/dL) and: a. Active bleeding b. Anticipated surgery or major invasive procedure 2. Factor XIII deficiency 3. Uremia with bleeding unresponsive to non-transfusion therapy 4. Fibrin glue 5. Active bleeding and Hemophilia A or vWD when purified factor concentrates not available (e.g. Humate P for vWD)

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