The objective of this study was to determine if a change in cryoprecipitate transfusion policy impacts donor exposure and fibrinogen level in a neonatal intensive care unit (NICU) population” Tkach et al (2018).

Abstract

BACKGROUND: The objective of this study was to determine if a change in cryoprecipitate transfusion policy impacts donor exposure and fibrinogen level in a neonatal intensive care unit (NICU) population.

STUDY DESIGN AND METHODS: The cryoprecipitate policy was changed from transfusing 10ml/kg to a maximum of 1 unit per transfusion in January 2013. Data were obtained via retrospective chart review of all infants receiving cryoprecipitate transfusions from January 2008 to February 2015 in the NICU at Christiana Hospital.

RESULTS: A total of 103 neonates received a total of 144 cryoprecipitate transfusions. Before the policy change, term babies were more likely to be exposed to more than one donor compared to preterm babies (75% vs. 6%, p < 0.01). After the policy change, no babies were exposed to greater than one donor per transfusion and there were similar increases in posttransfusion fibrinogen level as before the policy change.

CONCLUSION: Limiting cryoprecipitate transfusions to 1 unit per transfusion decreased donor exposure in infants without negatively impacting posttransfusion fibrinogen levels. This is especially evident in term neonates.

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decrease donor exposure. Transfusion. 25th February.

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