Whole Blood Transfusion

APPENDIX A: WALKING BLOOD BANK PROCESS MAP

1. Indications
   1a. Clinical determination of the need for FWB
   2a. Request/notification for emergency collection low titer O’WB

2. Request/Notification for emergency collection of type-specific FWB

3. ABO typing of the casualty*
   3a. Donor blood typing*
   4. Identification of potential donors
      4a. Blood donor criteria
      5. Screening of donors
      6. Collection of FWB

7. Processing of the collected sample (for shipment back to CONUS for retrospective testing of infectious disease)

8. Release of FWB

9. Monitoring of ongoing requirements of FWB

10. Cessation of FWB

11. Donor notification and counseling of positive infectious disease (positive result matrix & notification letter)

12. Follow up testing at 3, 6, and 12 months and counseling required for recipients of emergency collected FWB

*Low Titer Whole Blood (LTOWB) was approved as the universal blood product for resuscitation of exsanguinating hemorrhage. (Refer to resource #3 below.)

NOTE 1: Documentation of FWB collection/transfusion (maintain running log of pre-screened donors, data entry into TMDS, etc.) done throughout WBB procedure.

NOTE 2: Recommendation is for the 4 staff members (if available) to screen, collect and process whole blood unit from 8-10 donors.

Resources
- JTS CPG Whole Blood Transfusion – URL
- JTS CPG Damage Control Resuscitation, 03 Feb 2017