

**PHYSICIAN PROGRESS NOTE**

**RELATIVE INDICATIONS FOR TRANSFUSION\* 1PRG**

IMPRINT PATIENT IDENTIFICATION HERE

**RELATIVE INDICATIONS FOR TRANSFUSION\***

Packed RBC's or Whole Blood:

- Acute blood loss Anemia: not responsive to adequate volume resuscitation
- Symptomatic anemia: syncope, confusion, tachycardia and hypotension refractory to adequate volume challenge.
- Hemoglobin <7g/dl
- Unstable angina/Acute coronary syndrome/ST elevation myocardial infarction with hemoglobin<10g/dL
- Septic Shock with inability to normalize serum lactate and maintain SVO2>or equal to 70% after volume resuscitation and vasopressor support.  
May consider transfusion to hematocrit >= 30g/dL
- Gastrointestinal bleeding
- Preoperative hemoglobin <9g/dl
- Other (Specify): \_\_\_\_\_

Platelets:

- Active bleeding or undergo surgery & PLT <50,000
- No bleeding but PLT<10,000
- Diffuse microvascular bleeding
- Bleeding in a patient with a qualitative platelet defect, regardless of platelet count
- Other (Specify): \_\_\_\_\_

Fresh Frozen Plasma:

- PT>1.7 and APTT>48 in a non-bleeding patient scheduled for or undergoing surgery or other invasive procedure
- Documented factor deficiency (<25% activity) factor II, V, VII, IX, XIII, Heparin Cofactor II, Protein S, Hypofibrinogenemia (<100 mg/dl), Factor VIII, Von Willebrand's Disease, Anti-Thrombin III, if other concentrates are not available.
- Plasma exchange for TTP & Hemolytic Uremia Syndrome
- Reversal of Coumadin effect
- Diffuse microvascular bleeding in a patient losing more than 1 blood volume
- Other (Specify): \_\_\_\_\_

Cryoprecipitate:

- Hypofibrinogenemia (<100mg/dl)
- Diffuse microvascular bleeding and fibrinogen <120 mg/dl)
- Decreased factor VIII & Von Willebrand's Disease unresponsive to DDAVP
- Uremic Bleeding
- Factor XIII deficiency
- Other (Specify): \_\_\_\_\_

\* As provided by AABB Guidelines for Blood Utilization Review

\*\*After being informed blood is ready, blood should be picked up from the blood bank:

**STAT:** within 30 minutes of availability and within 60 minutes if patient needs pre-medicated

**Today or Date:** within 2 hours of availability

Physician Signature \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_



1PRG

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