

The background of the image is a dark, saturated red color, representing blood. Numerous red blood cells are scattered throughout the frame, appearing as semi-transparent, translucent spheres with a slight gradient from dark red at the edges to a lighter, almost pinkish-red center. They vary in size and orientation, some appearing as simple discs while others show more complex, rounded shapes.

IN THE NAME OF GOD

Storage of blood and blood components in blood bank

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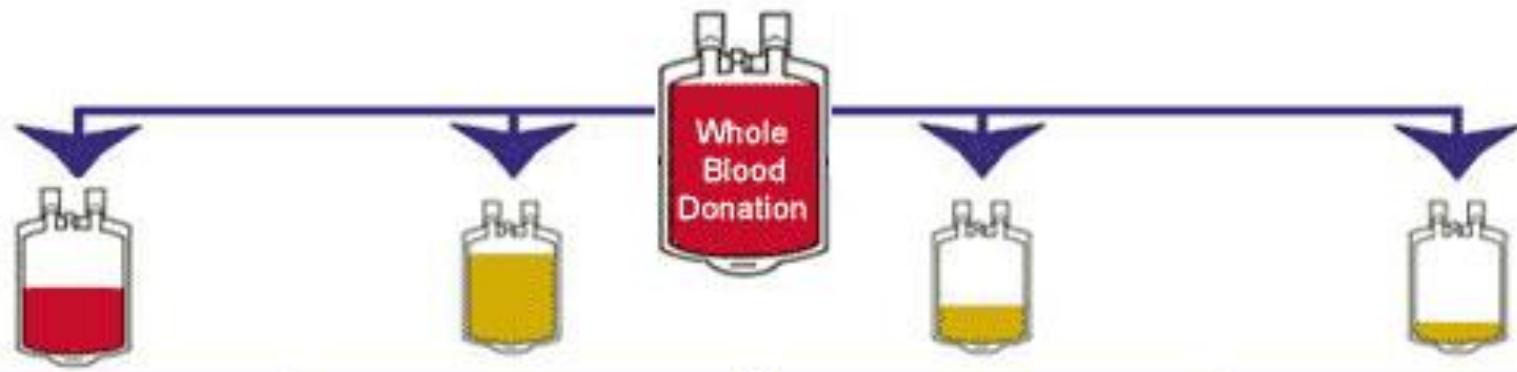


Goal

**Maintain viability and function
Prevent physical changes
Minimize bacterial contamination**



Blood Components



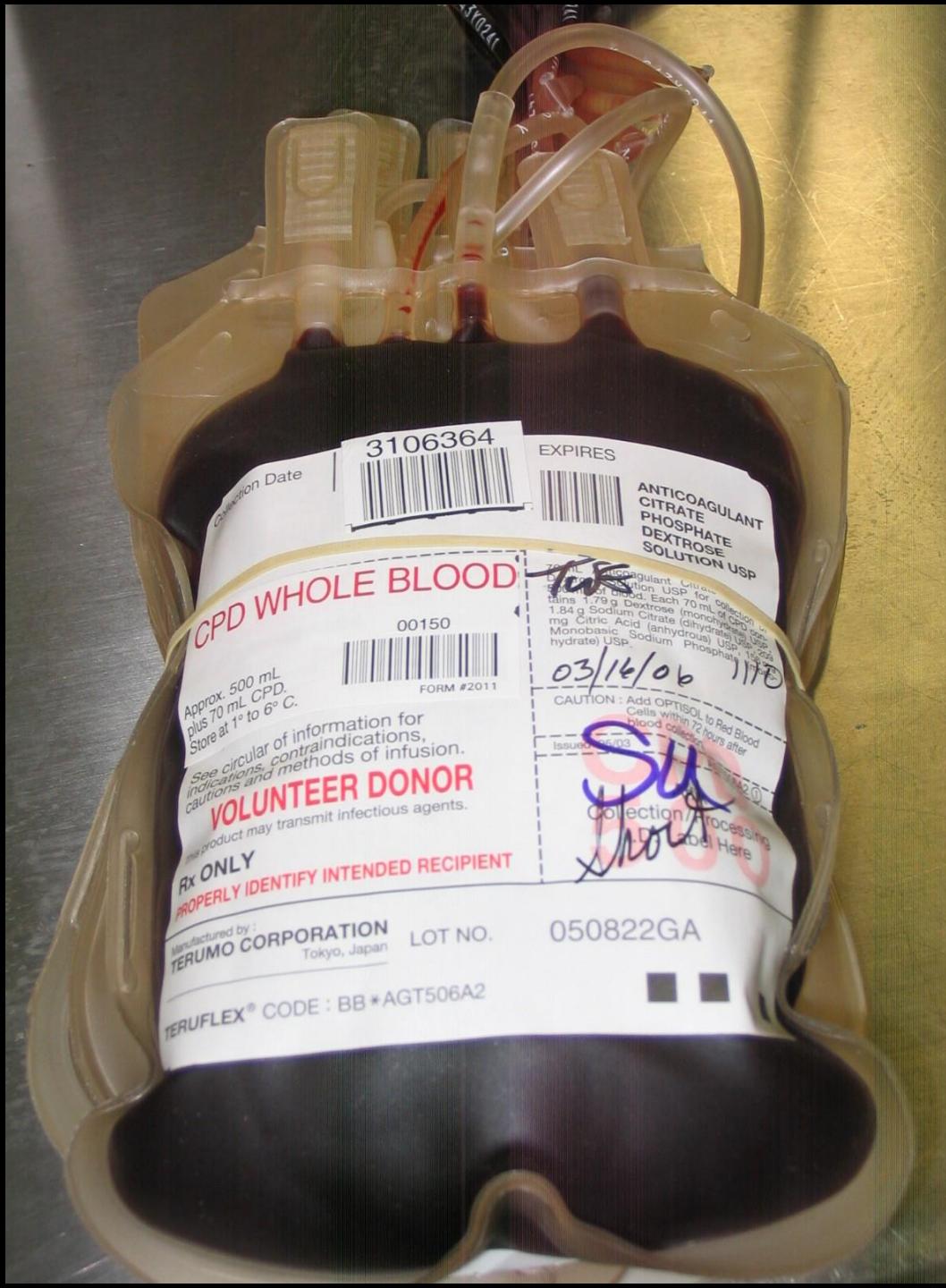
Red Blood Cells

Fresh Frozen Plasma

Concentrate of Platelets

Cryoprecipitate





Storage Lesion

- Significant for infants and massive transfusion.
biochemical changes

**ATP decreases
Potassium increases
Sodium decreases
Plasma hemoglobin increases**



Whole Blood

Whole blood and red cells must always be stored at a temperature between

- +1 °C and +6 °C.



Whole Blood

- The main reasons for giving a blood transfusion are to restore or help to maintain the body's oxygen-carrying capacity and the volume of blood circulating around the body
- If blood is not stored at between +1 °C and +6 °C, its oxygen-carrying ability is greatly reduced.
- **The anticoagulant/preservative solution in the blood bag contains nutrients for the blood during storage and stops the blood from clotting. The red cells can only carry and deliver oxygen if they remain viable: that is, if they retain the same properties as they have during their normal circulation in the body.**



Whole Blood

- The most important substances in maintaining the viability of red cells are glucose and adenosine triphosphate (ATP). It is essential to maintain an equilibrium between ATP, 2,3 Diphosphoglycerate (2,3 DPG), glucose and pH.
 - One of the anticoagulant/preservatives most commonly used is **citrate phosphate dextrose with adenine (CPDA-1)**. The dextrose and adenine help the red cells to maintain ATP during storage, and the citrate is the anticoagulant which stops the blood from clotting.



Whole Blood

- Another important reason for storing blood between +1 °C and +6 °C is to keep the growth of any bacterial contamination in the unit of blood to a minimum. If blood is stored above +6 °C, bacteria that may have inadvertently entered the unit during collection may grow to such an extent that transfusion of the contaminated blood could be fatal.
 - **The lower limit of + 1°C is also very important.**
This is because red cells are very sensitive to freezing. If they are allowed to freeze, the red cell membranes rupture and the haemoglobin is released; that is, the cells are haemolysed. The transfusion of haemolysed blood can also be fatal.



Whole Blood

- **Storage:** **CPD** :21 days stored at 1-6°
CPDA-1: 35 days stored at 1-6°





Packed Red Blood Cells

➤ **Storage:** **CPD** :21 days stored at 1-6°

CPDA-1: 35 days stored at 1-6°

Additive solution: 42 days



Anticoagulants

	CPD	CPD-A1
Storage time	21 days	35 days
Temperature	1-6 C	1-6 C
	Slows glycolytic activity	
Adenine	None	Substrate for ATP synthesis
Volume	450 +/- 10%	
Dextrose	Supports ATP generation by glycolytic pathway	
Citrate	Prevents coagulation by bindi	



Collection Date

2306471

EXPIRES



**AS-5 RED BLOOD CELLS
ADENINE-SALINE ADDED
LEUKOCYTES REDUCED**

16.7 mEq Sodium added.
From 500 mL
CPD Whole Blood.
Store at 1° to 6° C.

04750



FORM #5100

See circular of information for indications,
contraindications, cautions and methods of infusion.

VOLUNTEER DONOR

This product may transmit infectious agents. Rx only.
PROPERLY IDENTIFY INTENDED RECIPIENT.

Affix grouping label here after all
required testing has been completed.

3-15

149430410

Affix
Collection/Processing
I.D. Label Here

0650046

Pall Corporation
East Hills, NY 11548, USA

Assembled in Mexico

Saline Washed Red Blood Cells

A. Description: packed red cells washed with saline

1. 99% of plasma proteins are removed
2. 85% of leukocytes are removed



Saline Washed Red Blood Cells

- B. Processing:** manual and automatic methods
- C. Storage:** once washed, 24-hour outdate



Saline Washed Red Blood Cells

D. Indications:

1. History of allergic or febrile reactions secondary to plasma proteins not prevented by pre-transfusion administration of antihistamines and leukocyte reduction
2. IgA deficiency with documented IgA antibodies
3. History of anaphylactic reaction to blood components



Irradiated Blood Products

A. Products irradiated:

Whole blood, packed red cells, platelets and granulocyte concentrates



Irradiated Blood Products

B. Indications: preventing graft versus host disease

1. Immunocompromised patients
2. Directed donations from blood relatives
3. Premature infants ≤ 1200 gms
4. Fetuses receiving intrauterine transfusions
5. Neonatal exchange transfusions



Irradiated Blood Products

C.Storage:

Red cells outdate 28 days from irradiation (or original expiration if less than 28 days)



Red Blood Cells Frozen; Red Blood Cells Deglycerolized (D-RBC)

- Blood is frozen to preserve: rare types, for autologous transfusion, stock piling blood for military mobilization and/or civilian natural disasters.
- Blood is drawn into an anticoagulant preservative.
 - Plasma is removed and glycerol is added.
 - After equilibration unit is centrifuged to remove excess glycerol and frozen.
- Expiration
 - **If frozen, 10 years.**
 - **After deglycerolization, 24 hours.**
- Storage temperature
 - high glycerol -65 C.
 - low glycerol -120 C, liquid nitrogen.



4325403

Collection Date



EXPIRES

313

5W

1+

12

Store Platelets 5 days at
20-24°C
Store Red Blood Cells
42 days at 1-6°C

XT-612 Plastic

Manufactured by:
TERUMO CORPORATION
TERUFLEX® Tokyo, Japan

PLATELETS

Approx. 45-65 mL
from 500 mL CPD
Whole Blood.
Store at 20° to 24° C.

12000



FORM #2244

indications, contraindications,
cautions and methods of infusion.

VOLUNTEER DONOR

This product may transmit infectious agents.

Rx ONLY

PROPERLY IDENTIFY INTENDED RECIPIENT

031606106

Issued 10/99

S-4(P)-ARO

LOT NO.:

050621GB



Platelet Concentrates

Storage:

1. Stored at 20-24° C on a rotator
2. 5-day outdate



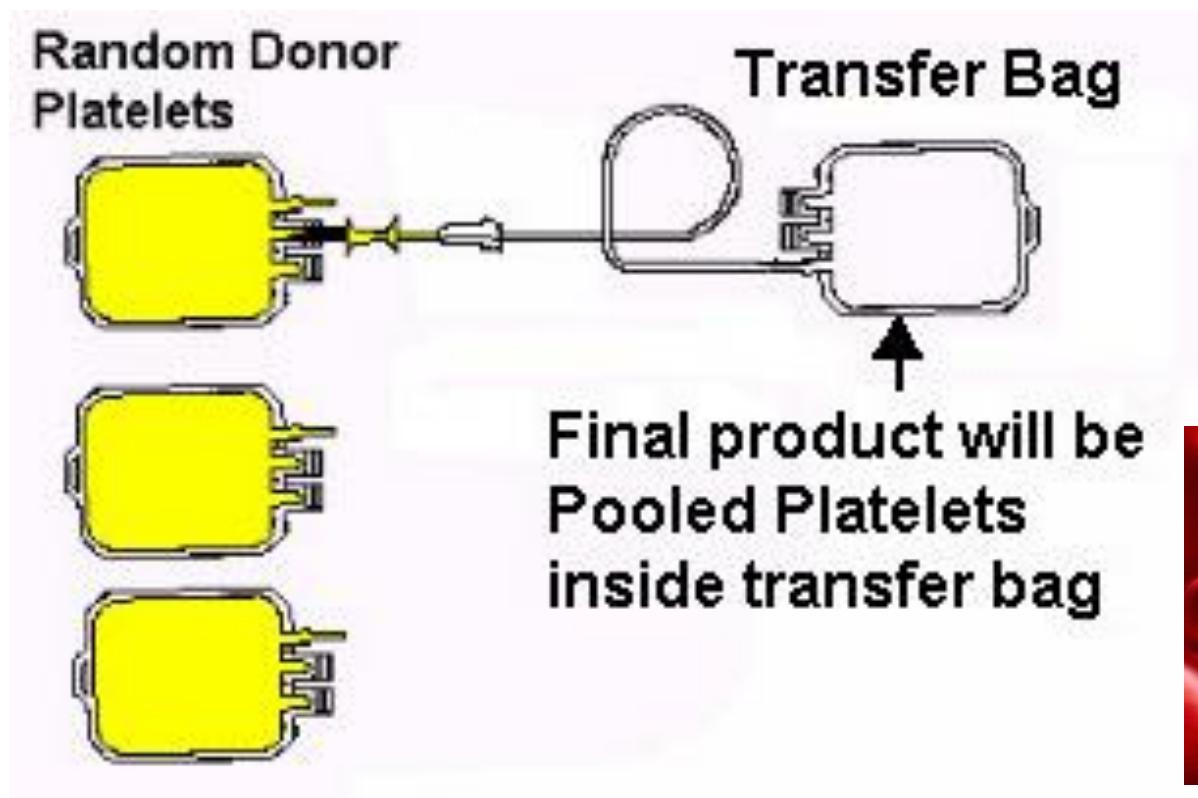
Platelets (PLTS), Platelet Concentrate (PC) or Random Donor Platelet Concentrate (RD-PC)

- Prepared from a single unit of whole blood.
- Due to storage at RT it is the most likely component to be contaminated with bacteria.
- ***Expiration is 5 days as a single unit, 4 hours if pooled.***
- **Store at 20-24 C (RT) with constant agitation. This is essential to prevent platelet aggregation which results in loss of viability.**



Pooling Platelets

- 6-10 units transferred into one bag
- Expiration = 4 hours



Collection Date

1554267



EXPIRES



02

Store Red Blood Cells
42 days at 1-6° C

Store Platelets 3 days at
20-24° C

Manufactured by :

TERUMO CORPORATION
TERUFLEX®

Tokyo, Japan

0314e06 1000
Rev. 10/99
LOT NO. : S-4-ARO ②
050929KK

FRESH FROZEN PLASMA

320

— mL from
500 mL CPD
Whole Blood.
Store at -18° C. or colder.

18201



FORM #7009

See circular of information for
indications, contraindications,
cautions and methods of infusion.

VOLUNTEER DONOR

This product may transmit infectious agents.

RX ONLY

PROPERLY IDENTIFY INTENDED RECIPIENT

Fresh frozen plasma

- Fresh frozen plasma (FFP) is plasma that has been separated from a unit of whole blood within 6 to 8 hours of collection, and has been rapidly frozen and maintained at all times at a temperature of -20°C or lower.

There is no lower temperature limit for the storage of FFP, although the optimal temperature is -30°C or lower .

- Plasma contains water, electrolytes, clotting factors and other proteins(mostly albumin), most of which are stable at refrigerator temperature, i.e. $+1^{\circ}\text{C}$ to $+6^{\circ}\text{C}$. Factor V and Factor VIII, however, which are essential in the clotting mechanism, will deteriorate and diminish in quantity if they are not stored at -20°C or lower and greatly reduce the clotting activity of the plasma. FFP may be given to a patient to restore or help to maintain coagulation factors such as Factor V or Factor VIII.



Fresh frozen plasma (FFP)

- **Storage:** **<=-18 C**: 12 months from collection
<=-65 C: 7 years from collection



Thawing Plasma

Fresh Frozen Plasma (FFP), Plasma Frozen within 24 Hours After Phlebotomy (PF24), and Plasma Frozen within 24 Hours After Phlebotomy Held at Room Temperature up to 24 Hours After Phlebotomy (PF24RT24) must be thawed at 30 to 37 C using a waterbath or other FDA-approved device.

Thawing in a waterbath requires the frozen component to be in a plastic overwrap before insertion into the water to prevent contamination of the container entry ports.

Thawed plasma products (FFP, PF24, and PF24RT24) are stored at 1 to 6 C and expire 24 hours after thawing.





Cryoprecipitate (CRYO), Factor VIII or Anti-Hemophilic Factor (AHF)

- **Storage Temperature**
 - Frozen -18 C or lower
 - Thawed - room temperature
- **Expiration:**
 - Frozen 1 year
 - Thawed 6 hours
 - Pooled 4 hours
- Best to be ABO compatible but not important due to small volume



Thawing Cryoprecipitate

Cryoprecipitate is thawed at 30 to 37 C, is gently resuspended, and can be pooled for ease of transfusion using small quantities of 0.9% sodium chloride, injection (USP) to rinse the contents of the bag into the final container

Thawed cryoprecipitate is stored at 20 to 24 C and expires within 4 hours of pooling if it is pooled in an open system or **within 6 hours for single units** or units pooled using an FDA-cleared sterile connecting device.



Summary of storage temperatures

Liquid RBCs 1-6C

Platelets, Cryo (thawed) and granulocytes 20-24C (room temperature)

ANY frozen plasma product ≤ -18C

ANY liquid plasma product EXCEPT Cryo 1-6C



The background of the image is a dark red color, representing blood. Numerous red blood cells are scattered throughout the frame, appearing as semi-transparent, translucent spheres with a slight shadow on one side, giving them a three-dimensional appearance.

TNX FOR YOUR ATTENTION