Investigation of Possible Transfusion-Acquired Infection

LifeStream, in accordance with AABB Standards, requests that transfusing facilities and/or the physicians of blood recipients to report any suspected transfusion-associated infections for further investigation. Examples of possible infections include hepatitis, HIV, HTLV-I/II, Trypanosoma cruzi, malaria, babesiosis, or CMV. Such notification to the blood center is extremely important from a public health perspective.

To report a possible transfusion-acquired infection, we request that the reporting institution complete both sides of form: Report of Suspected Transfusion-Acquired Infection (Form 0272F4) and send to Medical Surveillance at LifeStream. Please call LifeStream’s Hospital Relations Manager to obtain either an electronic or paper version of this form.

Prior to reporting a suspected transfusion-acquired infection, it is important that the attending physician perform as complete a workup as possible on the patient. For example, if a patient has a reactive anti-HCV assay, it should be followed up by a supplemental HCV NAT (Nucleic Acid Test) and/or a second licensed anti-HCV antibody screening assay. Failure to perform a complete laboratory and clinical evaluation prior to reporting suspected cases will delay the blood center's investigation, and perhaps result in needless deferral of healthy blood donors.

Coordination of the investigation is performed under the direction of a LifeStream medical director by Medical Surveillance. At the completion of the investigation, LifeStream will provide any notification deemed appropriate to the transfusing facility and/or physician.

Please contact Medical Surveillance at LifeStream at 909.885.6503 extension 655 regarding any questions about reporting an infection possibly related to blood transfusion and to obtain additional copies of the correct reporting forms.

LifeStream will provide current forms to report adverse events (Reportable Adverse Event Form and Report of Suspected Transfusion-Acquired Infection) annually.