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TRALI Policy

The Blood Center follows current industry guidelines to reduce the risk of Transfusion Related Acute Lung Injury (TRALI) in recipients who receive high volume plasma products.

• Allogeneic or directed donors must answer the following questions on the Donor Registration Record (DRR).

Female donors: Have you ever been pregnant or are you pregnant now?

Male & Female donors: Have you ever had a blood transfusion?

- High volume plasma products and whole blood for allogeneic transfusion should be from
 - o Donors who have never been transfused with cellular blood products
 - Donors who have been transfused with cellular blood products and have been tested for HLA antibodies since their most recent transfusion and results interpreted as negative
 - o Females who have not been pregnant
 - o Females who have been pregnant and have been tested for HLA antibodies since their most recent pregnancy and results interpreted as negative
- If either question is answered in the affirmative by a donor, the following blood products will not be produced unless the donor has been screened for HLA Antibodies and results interpreted as negative
 - o Fresh Frozen Plasma (FFP) obtained from whole blood
 - FFP obtained from apheresis
 - plasmapheresis
 - plasma collected concurrently with a cellular component (red cells or platelets)
 - Plasma, Cryoprecipitate Reduced (i.e., Cryo-poor plasma) obtained from whole blood
 - Plasma Frozen Within 24 Hours After Phlebotomy (PF24) obtained from whole blood or apheresis

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- o Plasma Frozen Within 24 Hours After Phlebotomy Held At Room Temperature Up To 24 Hours After Phlebotomy (PF24RT24) obtained from apheresis
- o Thawed Plasma from any of the above products
- o Liquid Plasma
- Whole Blood (if designated for transfusion as whole blood rather than for component preparation)
- Donors testing reactive for HLA antibodies are deferred from donating high volume plasma products and are notified by the Medical/Legal Department of their donation status
- Donors with blood products implicated in a possible TRALI case and, upon testing are found to be reactive for anti-HLA antibodies, are permanently deferred from allogeneic blood donations.
- Donors who are the only provider of blood components to a patient with a suspected case of TRALI, and do not test reactive for anti-HLA antibodies, are permanently deferred from allogeneic blood donations if determined as such following Medical Director review.
- The Blood Center will manufacture Recovered Plasma for further manufacturing

Document Change Control:

() Major Change (Change Control & Risk Analysis Required)		Change Control Submission Date:
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