

Lviv (Ukraine), 23 September 2015

Fully Automated Blood Transfusion laboratory: Strategy of an Italian Donor & Patient testing Hospital



Dr Donatella Londero

Dept. Transfusion Medicine, AOU Udine, Italy

Department of Transfusion Medicine "Area Vasta Udinese"



Immunohaematology Laboratory



Dedicated Laboratory Area for Blood testing with access restricted to authorised personnel



IE Laboratory activity

- A) Immunohaematological tests to perform at the time of each donation for the biological validation of blood components in accordance with national current regulatory requirements (Law n. 219/2005 and other directives)
- B) Pretransfusion testing to perform to each sample of RBC transfusion recipients in routine and urgent situations
- C) Immunohaematological investigations aimed at the diagnosis and prevention of any disease or condition likely to require a blood transfusion or administration of blood components, also including Molecular Typing

Activity►**Donors**

New Donors

- ABO typing on RBCs using anti-A, anti-B, anti-AB reagents
- ABO typing on plasma using A1, A2, B, O erythrocytes
- Rh typing using 2 different anti-D reagents (D^{VI+}/D^{VI-})
- Rh/Kell phenotyping
- Weak D antiglobulin test
- Antibody screening

Donors already typed

 ABO/Rh typing on RBCs using anti-A, anti-B, anti-AB, anti-D reagents

At the second donation

- Rh/Kell phenotype
- Antibody screening





Donors Activity- 2014

AB0 Rh 1°	ABO/Rh	Rh/Kell	Antibody	Molecular	Total
Determination	Control	Phenotype	Screening	Typing	Tests
3231	47887	5475	3371	570	66009



COLLECTED	No.
WHOLE BLOOD (units collected)	36.138
PRODUCTIVE APHERESIS (procedure number)	11.680

Transfusion Department Policy

Type and screen and Computer crossmatch for patients with negative IAT

Antibody identification, Antigen negative Units, Serological Crossmatch for patients with positive IAT

Ricerche Data prova Esito Sintesi anticorpi anticorpali 12-09-2015 11:53 NEG Cat. Cat. Dati richiesta Cat. Cat. Cat. Cat.																		
Richiesta Data arrivo 100055158 12-09-2015 10	Р :53-1	revis 2-09-2	ta trasf. 1015 11:53	Ind Altre	l icazione t e indicazioni	r asfusi per glol	i on a buli i	a le rossi	Re PE	eparto DIATE	richi Ria cli	edente NICA - U	de Idin Os	e l spedale di Udin	e			
Ellenco richieste 🖶 Unità da assegnare Data di assegnazione 15-09-2015 11:43																		
Operatore LONDERO DON	IATEI	LA			LETTUR	A BARC	COD	ΕΓ			Unità	compatib	ili	Assegna	Unità	già as	segnat	e
Dettaglio richiesta Emocomponente richiesto 25 Emazie concentrate prefiltrate Unità confermate 2 Unità assegnate 1 Modalità ass. T																		
Unità compatibili Struttura 0721 Sede 1	F	rigoem	oteca 🛛	JF2														
CDM	Emc	Bag	Volume	Data	i scadenza	Uso S	it	Sp	Val	ABO	Bh	FtRh	Kell	Duffy Kide	1			^
Unità DISPONIBILI compa	atibili					_	_			-						Live	llo com	ıp. 🦰
10706 15.002394	25	01	259	02-10	-2015 23:59	0	D			0	PUS	CCDee	kk				1	
10711 15.166061	25	01	245	03-10	-2015 23:59	0	D		V	U	PUS	CCDEe	kk	Jka+l	^{>+}	*	1	
I071415.074302	25	01	270	03-10	-2015 23:59	0	D		V	0	POS	CCDee	kk			*	1	
I070615.062323	25	01	243	03-10	-2015 23:59	0	D		V	0	POS	CcDee	kk			*	1	
1071115.166076	25	01	247	03-10	-2015 23:59	0	D		V	0	POS	CcDee	kk			*	1	
I071415.074286	25	01	252	03-10	-2015 23:59	0	D		V	0	POS	CCDee	kk				1	
I070615.002554	25	01	272	05-10	-2015 23:59	0	D		V	0	POS	ccDee	kk			⇔	1	
T070615.062210	25	01	257	06-10	-2015 23:59	0	D		۷	0	POS	CcDee	kk				1	~

Activity Blood requests

New Patients

- Forward and Reverse ABO Typing
- Rh typing using 2 different anti-D (DVI+/-)
- Rh/Kell phenotyping for patients younger than 50y/old or multi-transfused
- Weak D antiglobulin test
- LISS/Coombs IAT at 37°C





The T&S sample validity period depends on the patient's transfusion and obstetric history:

•72-hour expiry time for patients transfused in the 3 months preceding pretransfusion sample collection or for currently pregnant patients

•60 days expiry time for patients who does not have a history of transfusion or pregnancy

Activity Blood requests

Known Patients with valid T&S

 ABO/Rh control on RBCs using anti-A, anti-B, anti-D reagents

Known Patients with invalid T&S

- ABO/Rh control on RBCs using anti-A, anti-B, anti-D reagents
- Rh/Kell phenotype (if not known)
- Antibody screening





In all cases, when IAT is positive or a patient is known to be immunised, the laboratory must **identify antibody specificity** (or confirm it) and perform **serological crossmatching** by the LISS-IAT method, using compatible donor's RBC, antigen negative, very often **extensive typed** by molecular biology.

Transfusion Activity-2014

Type&Screen	ABO/Rh	AB0 Rh 1°	Serological	Total
	Control	Determination	Crossmatch	Tests
8691	3899	1212	1904	15706

TRANSFUSED	No.
Transfused ERYTHROCYTES (units)	25.797
Transfused PLATELET CONCENTRATIONS (units)	3.414
PLASMA for clinical use	1.602

Activity Specialised Diagnostic Profiles

Immunohaematological investigations aimed at the diagnosis and prevention of the HDN:

- Maternal/Neonatal serological and molecular typing
- Fetomaternal hemorrhage detection
- IAT, DAT
- Elution of maternal Ab
- Titration of Haemagglutinins



Investigations in cases of Alloimmunization including:

- Antibody screening/Identification/Titration
- Elution/Adsorption methods
- Serological/Molecular Extensive Typing on recipients and Blood Units



Activity Specialised Diagnostic Profiles

Immunohaematological investigations aimed at the Study of autoimmune haemolytic disorders:

- Direct Antiglobulin test
- Cold reactive Autoagglutinins identification and titer
- Autoadsorption/Elution
- Paroxysmal Cold Hemoglobinuria Test
- ABO/RH molecular Typing

Immunohaematological investigations aimed at the Study of Immune Platelet Disorders:

- •Platelet Antibody Assays (solid phase red cell adherence; ELISA
- •Anti-PF4/heparin antibody test
- Pre-transfusion Platelet Crossmatching
- Molecular Typing of Platelet Specific Antigens

Diagnostic Activity-2014

Automated tests	No.			
ABO/Rh Patient Group	15806			
Neonatal Group	1690			
Ab screening	11866			
Ab identification	505			
Direct antiglobulin Test	1603			
Anti-PLT Test	984			
Manual tests	No.			
Eluation/Adsorption	150			
Cold Agglutinines Identification	40			
FMH	119			
Anti-PF4/heparin antibody test	159			
Molecular Typing	94			



Implementation of information techology systems

Improvements to the safety of blood transfusion result from application of modern-day technology

Automated sample processing equipment



The Benefits of Automation

- Standardization of testing procedures
- Documentation and Traceability of all steps
- Decrease average Turn-around-time
- Ability to process more samples without increasing staff
- Interface with LIS (laboratory information systems)



Equipment

There are two major methods used in automation:

- Gel column
- Microtiter plate technologies















Our Strategy

NEO-Immucor

- Use hemagglutination for antigens and solid phase red cell adherence assay for antiglobulin phase (Du, antibodies)
- Platform suited to process large batches with the same testing requirements (T&S; Platelet crossmatchnig; PLT antibody assays)
- High throughput and good turn-around time

Donor Samples and Patient Routine samples



Our Strategy

ERYTRA/WADIANA-Grifols

- Platform suited to process urgent samples, small batches or single samples with multiple diagnostic requirements (T&S; IAT, DAT, Antibody identification, Antigen Typing)
- Easy to perform, interchangeable depending on the workload

Urgent/Routine Pre-transfusion Samples IE Diagnostic Activity



Blood Group Testing Area



Urgency Testing Area



Distribution of Blood Components Area



IE Diagnostic Area



Molecular Testing Area



Storage Area



Irradiation Area



Validation Master Plan of the Process

- Identification of the requirements and process steps
- Risk-assessment
- Validation activities:
 - Qualification of premises and space
 - Qualification of equipments
 - Qualification of materials
 - Qualification of personnel
 - Validation of the analytical methods



Validation of Analytical Process







European Committee (Partial Agreement) on Blood Transfusion (CD-P-TS)

EDQM 14th Schitterer 2012





Thank you for your attention