

CANADIAN ANIMAL BLOOD BANK

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Platelet Concentrate

Platelet concentrate is made from 450 ml of whole blood collected in the anticoagulant Citrate Phosphate Dextrose Adenine (CPDA-1). The buffy coat layer, including white cells and platelets, is removed within 6 hours of collection. Shelf life is 7 days from collection date when stored at room temperature on a rocking surface. Platelet concentrate normally contains some red blood cells.

Product Numbers

PL01 Volume of 50 – 60 ml

Indications for use

- Thrombocytopenia

Dosage / Rate of Infusion Guideline

Highly variable based on cause of thrombocytopenia and patient's response to treatment. Recommended dose of 1 unit / 10 kg body weight. Infuse as quickly as the patient can tolerate. Assess platelet count 2 hours after infusion.

Preparation

- Check expiration date.
- Examine unit for bacterial colonies.
- Open one port and insert spike from filter set. Recommended filter size is 80 µm.
- Units may be pooled if desired.

Precautions

- **Do not use the unit if it is past the expiration date, contains bacterial colonies.**
- Always use a filter set.
- Use the unit within 4 hours. Discard any unused portion to biohazardous waste.
- Never run or mix IV medications, colloids, Ringer's lactate with the unit even if the lines are in different limbs. These products are not compatible with blood products and will cause hemolysis and/or clotting. Physiological saline is the only compatible solution. The IV line must be flushed with saline before and after the infusion of a blood product.

Reactions

- *Anaphylactic / Anaphylactoid Reaction:* Characterized by urticaria, pruritis, erythema, edema, emesis, dyspnea, hypertension, bronchoconstriction, and severe shock. Can be mild or life threatening. Onset is rapid, occurring 1-45 minutes from the start of the transfusion.
- *Febrile Reaction:* Characterized by an increase in temperature of at least 1° C and no other cause of fever can be identified, vomiting, tremors, occurring within 30 minutes of the start of the transfusion.
- *Platelet refractoriness:* Patients receiving multiple transfusions frequently become refractory to donor platelets. A working definition of "refractory" is the failure to obtain a platelet increment after each of two consecutive platelet transfusions.