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| **Blood Transfusions and Iron infusions in Same Day Emergency Care (SDEC)**  **Standard Operating Procedure** | |
| **SETTING** | A413 Medical Division |
| **FOR STAFF** | Acute Medicine |
| **PATIENTS** | Patients requiring blood transfusion or iron infusion in non-emergency setting |
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| **Aim:**  To set out the standardised instructions for carrying out blood transfusions and iron infusions on patients in a non-emergency setting.  **Patients suitable for blood transfusion in SDEC:**   * Patients with anaemia in whom:   + Haematinics have been checked (consider iron infusion if iron deficient)   + Haemoglobin <70, or haemoglobin <80 and history of ischaemic heart disease   + Presenting with symptoms of anaemia * Patients ≥ 18 years old * Ambulatory patients able to sit in a chair   **Patients not suitable for blood transfusion in SDEC:**   * Unstable patients requiring blood transfusion in an emergency * Patients under oncology who should receive blood transfusion in oncology day unit * Patients under renal team (should be discussed with renal team at NBT) * Patients who are not symptomatic from anaemia * Caution for patients with heart failure – consider IV ferinject as an alternative * Patients under the age of 18 * Any patient self-isolating due to a potential Covid 19 exposure * Any patient with symptoms suggestive of Covid 19 * Any patient with a positive Covid 19 test within 14 days or who remains symptomatic * Any patient with symptoms of diarrhoea and vomiting or with a history of diarrhoea and vomiting in the past 48 hours * Confused patients * Patients unable to sit in a chair or who are at high risk of pressure sores through this.   **Referral Process for Blood Transfusion in SDEC:** | |

**Patients suitable for iron infusion in SDEC:**

* Patients must have:
  + Demonstrable iron deficiency anaemia (see Box 1) **AND**
  + An indication for parenteral iron therapy (see Box 2)
  + ≥ 18 years old
  + ambulatory and able to sit in a chair

**BOX 2: Indications for parenteral iron therapy**

1. Where oral iron is poorly absorbed, e.g. inflammatory bowel disease, malabsorption, short gut syndrome
2. Iron deficiency in the context of significant heart failure, as oral iron supplementation is ineffective
3. Where oral iron results in unacceptable side-effects
   * However, **IV iron should not be offered routinely without trial of at least two preparations of oral iron** (sulphate, fumarate, gluconate, available in tablet and/or liquid form)
4. Where administration of oral iron has proven ineffective
   * **A therapeutic trial of 2 months of oral iron should be offered in the first instance** before referring for IV iron
   * Consider concurrent administration of ascorbic acid to improve absorption if oral iron fails

IV iron is also indicated in anaemia of chronic kidney disease, but these patients should receive IV iron therapy via the renal team at NBT, therefore referrals in this context will not be accepted at UHB.

**BOX 1: Evidence of demonstrable iron deficiency anaemia**

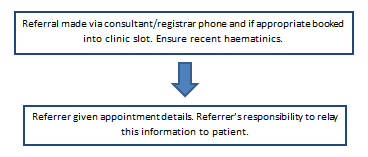
* Hb <110g/L
* Microcytic or normocytic anaemia
* Low ferritin or high zinc protoporphyrin

**Referrals without demonstrable iron deficiency by the above criteria will not be accepted**

**Patients not suitable for iron infusion in SDEC:**

* Patients with
  + previous allergy to intravenous iron therapy
  + 1st trimester pregnancy
  + acute or chronic infection
  + condition causing increased susceptibility to iron overload
  + non-iron deficiency anaemia
  + thalassaemia or sickle cell disease
  + hepatic impairment including cirrhosis and active hepatitis
  + acute renal failure
* Patients under renal team (should be discussed with renal team at NBT)
* Patients under the age of 18
* Any patient self-isolating due to a potential Covid 19 exposure
* Any patient with symptoms suggestive of Covid 19
* Any patient with a positive Covid 19 test within 14 days or who remains symptomatic
* Any patient with symptoms of diarrhoea and vomiting or with a history of diarrhoea and vomiting in the past 48 hours
* Confused patients
* Patients unable to sit in a chair

**Referral Process for Iron Infusion in SDEC:**



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