# HPM.1.3 Report Adverse Transfusion Events

**Procedure Area:** Hospital Patient Management (HPM)  
**Version:** 2.0

## Purpose
To report adverse transfusion events.

## Scope
Customers

## Materials
- Transfusion Reaction and Adverse Event form

## Procedure Notes
- Your facility is responsible for performing all lab work associated with a suspected bacterial contamination (i.e., Gram stains and cultures); provide all findings.

## Procedure Steps
1. Confirm the adverse event is reportable; refer to the types of suspected adverse events listed on the Transfusion Reaction and Adverse Event form and the criteria included in the NHSN Biovigilance Component Hemovigilance Module Surveillance Protocol. If you are unsure whether the adverse event is reportable, contact the Medical Office using the numbers listed on the Transfusion Reaction and Adverse Event form.
2. If adverse event is reportable, perform the following:
   a. Complete your facility’s transfusion reaction workup report form and the Transfusion Reaction and Adverse Event form.
   b. Fax your facility’s transfusion reaction workup report form, any supporting documentation, and the Transfusion Reaction and Adverse Event form.
   c. Verify fax receipt using the confirmation number provided on the Transfusion Reaction and Adverse Event form.

## Related Documents
- NHSN Biovigilance Component Hemovigilance Module Surveillance Protocol
## HPM.1.3 Report Adverse Transfusion Events

**Procedure Area:** Hospital Patient Management (HPM)

**Version:** 2.0

### Version History

<table>
<thead>
<tr>
<th>#</th>
<th>Significant Changes</th>
<th>Approved by</th>
<th>Approved</th>
<th>Implemented</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.0</td>
<td>• Updated instructions for reporting adverse transfusion events to include <em>Transfusion Reaction and Adverse Event</em> form.</td>
<td>Dr. Juan Merayo-Rodriguez, Medical Director</td>
<td>25 Mar 2020</td>
<td>07 Apr 2020</td>
</tr>
<tr>
<td></td>
<td>• Removed references to discontinued forms.</td>
<td>Dr. Chris Lough, VP of Medical Services</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lori Masingil, VP of Quality</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1.0</td>
<td>• Added supplementary report forms for reporting adverse events and included instructions for which form to use based on type of suspected event.</td>
<td>Dr. Juan Merayo-Rodriguez, Medical Director</td>
<td>17 Jul 2015</td>
<td>04 Aug 2015</td>
</tr>
<tr>
<td></td>
<td>• Added a procedure note explaining that the facility is responsible for performing all lab work associated with a suspected bacterial contamination (i.e., Gram stains and cultures) and for providing all findings.</td>
<td>Dr. Marek Fried, Medical Director</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Removed investigation criteria table; added step to refer to the criteria listed in the <em>National Healthcare Safety Network Biovigilance Component Hemovigilance Module Surveillance Protocol</em>.</td>
<td>Matt Audette, QA Manager</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Made minor updates to steps for faxing documents and verifying fax receipt.</td>
<td>CBCC Medical Director</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Added version information.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Note:* Prior versions of this document may exist; version numbers were applied to policies and procedures beginning in ~Jan. 2015.