

Pathology and Laboratory Medicine Memorandum

To: NSHA, St. Anne's Community Centre and IWK Physicians, Health Service Managers, Nurse Educators

From: Program of Pathology and Laboratory Medicine

Date: August 17, 2020

Message: Implementation of Nova Scotia Guideline for Blood Component Utilization in Adults and Pediatrics (Version 2)

Effective 2020-09-15 Version 2 of the **Nova Scotia Guideline for Blood Component Utilization in Adults and Pediatrics** will implemented.

Summary of key changes include:

- Acute coronary syndrome, intrauterine transfusions and chronically transfused patients have been exempt from the red blood cell guideline.
- Stable, non-bleeding patients with hemoglobin levels less than 60 g/L (pregnant patients with hemoglobin levels less than 70 g/L) should receive 1 unit of red cells then be reassessed before transfusing a second unit of red cells.
- Fibrinogen levels have increased/decreased depending on the indication for cryoprecipitate transfusion following the release of the NAC statement on fibrinogen concentrate.
 - Congenital fibrinogen deficiency- cryoprecipitate transfusion was indicated for those patients with a fibrinogen level of less than 1 g/L and this has changed to less than 1.5 g/L.
 - Acquired hypofibrinogenemia with or without DIC - cryoprecipitate transfusion was indicated for those patients with a fibrinogen level of less than 2 g/L and this has changed to less than 1.5 g/L.
- Platelet dosing for pediatric patients greater than 4 months corrected age was increased from 10 mL/kg to 10-15 mL/kg.
- Provincial utilization of forms NS_OSCTRBC and NS_OSCTPC for ordering blood components outside of Central Zone and IWK.

If you have any questions, please contact Jennifer LeFrense (Manager, Nova Scotia Provincial Blood Coordinating Team) at (902) 487-0504 or jennifer.lefrense@nshealth.ca