Donor Reaction Management

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Follow The Donor - Registration
Fill the Universal Donor Questionnaire
Donor Interview and Physical Exam
Donation Area – Half of the Donor Reaction Happen During Donation
Post Donation Resting x 15 min – Half of the Donor Reaction Happen Here
Why Is It So Important?

• All our donors are volunteers. They are donating their blood, time, and good will.
• One of the most important aspects of our customer service.
• Donors with reactions experienced good care may become most loyal donors in the future
• Risk management
Who Should Take Care of Donors?

• Staff /nurses treat the donor immediately, will not call you for most of the mild reactions.
• Residents: For moderate to severe reactions, the staff is required to call the resident on service (day, nights, weekends)
• Medical directors: discuss cases with severe reactions with MD (on BPC service) or when you are not sure what to do with a moderate reaction or it is progressing to severe reaction
• Document the reaction is as important as the management of the reaction: please complete the donor reaction/incident form and sign your name
Who Reacts More?

- First time donors > repeated donors
- Female donors > male donors, especially in first time donors (16.7% vs. 7.3%)
- Younger donors (under 20) > older donors
- Low body weight > high body weight
- Donating 500 ml > donating 450 ml (estimated increase in reaction 18% if 450 ml to 500 ml)
- No difference in race
Frequency of Donor Reactions?

- Reported overall rate of donor reactions in whole blood donation: 5% - 36% (post-donation survey)
- High school population: 8% in first time, 16-17 y
- Autologous donors: only 3.8%, also less severe reactions
- Phlebotomist interpersonal skills predicts a reduction in reactions among volunteer blood donors - University of Pittsburgh study
Severity of the Reactions

- **Mild**: symptoms and signs lasted less than 15 minutes, assurance and simple measures such as position changes, oral fluid intake relieve the symptoms.
- **Moderate**: mild symptoms lasting longer than 15 minutes or vital sign changes (bradycardia, hypotension).
- **Severe**: fainting or falling, tetany/rigidity or tremors of extremities, incontinence, convulsions, wheezing, mod. symptoms > 15 min, unresponsiveness.
- **Most severe**: cardiac, respiratory arrest or pending arrest – call 911, UCLA emergency room preferred.
Donor Reaction Report

ACTION INFORMATION:

Rx

Reaction occurred

Location

Staff Present? Y/N

Non-UCLA Staff Witnessess

Witness 1

Witness 2

Mild Symptoms

Moderate Symptoms

Severe Symptoms

Check Here

(signs & symptoms of mild reaction
along with any of the following)

(signs & symptoms of moderate reaction
along with any of the following)

(signs & symptoms of moderate reaction
along with any of the following)

Pallor

Bradycardia(slow pulse)

Fainting (sit/stand)

Diaphoresis(sweating)

Hypotension

Tetany

Rapid pulse

Hypertension

Convulsions

Warm feeling

Twitching movements

Incontinence

Lightheaded/Dizzy

Vomiting

Respiratory arrest

Weakness

Difficulty breathing

Cardiac arrest

Nausea

Chest Pain

Unresponsive___ seconds

Hyperventilation

Paresthesias (lips/fingers/nose)

Laryngeal/Tongue edema

Tingling (perioral/fingers)

Mild symptoms >15 minutes

Wheezing

Moderate Symptoms >5 mins.

Action/Treatment

Mild Symptoms

Moderate Symptoms

Severe Symptoms

Donation discontinued

Donation discontinued

Fluids administered (IV)

Feet elevated

Physician consult requested

Donor restrained to avoid injury

Cold pack applied

Call 911

Advised slow/deep breaths

Notify BB MD

Breathing into paper bag

Fluid intake (oral) Vol

Vitals Signs (Every 15 Minutes)

Time

Pre

D/C Vital

B/P

Pulse

Initial

Given time

Amputated

W/C

Stretcher

Donor’s D/C Condition

Stable

Unstable

Handed By

Relationship

D/C Staff (RN)

Date

MD Review

QA FAX

Online IR completed

Follow-Up Calls

1 Date/Time Msg

2 Date/Time Msg

3 Date/Time Msg

Signature

Discharge time

Ambulatory

W/C

Stretcher

Donor’s D/C Condition

Stable

Unstable

Accompanied By

Relationship

Data

QA FAX

Online IR completed

Discharge time

Ambulatory

W/C

Stretcher

Donor’s D/C Condition

Stable

Unstable

Accompanied By

Relationship

Data

QA FAX

Online IR completed

Signature
Common Donor Reactions

• The most common one – Venous access:
  – Bruising, pain, swelling – mostly mild
  – Hematoma

• What you can do?
  – Stop bleeding: pressure, gauze, bandage
  – Apply cold pack
  – Advice to use warm pack later, take Tylenol for pain
  – Bruised area: dark red – yellowish - disappear

• Infection: should not happen, skin preparation
Vasovagal reaction

• The second most common reaction
  – Parasympathetic stimulation (↓ HR, ↓ BP, ↓ cardiac output) vs hypovolumic reaction (increase HR, ↓ BP)
  – Mild: quite/not talking, pallor, sweating – ask donor how he/she is feeling – they may have nausea, vomiting, lightheaded, dizzy
  – Severe: fainting, falling, incontinence, unresponsiveness, seizure, cardiac or respiratory arrest
  – 8% in high school students, 3% in general population
Vasovagal reaction

• Management:
  – Reassure the donor: decrease anxiety
  – Change position/prevention of falling: head down, feet up on bed, chair or pad
  – Apply cold pack to forehead, neck
  – Loosen tight clothing
  – Hydrate donor: water, juice, other food
  – Check /record vital signs
Vasovagal reaction

• Management:
  – When donor feels better, change position to sitting for few minutes, then standing for few minutes before sending to rest area (another 15 minutes before leaving)
  – Call 911 for cardiac, respiratory arrest - for mobile, inform somebody from the site (school nurse, manager, friends, family…), follow up information (hospital name, address)
Hypovolemia/Overdraw

• Limit on donation: 10.5 ml/kg body weight or 15% TBV in apheresis donations
• Symptoms: similar to vasovagal reactions, but HR increased
• Management
  – Ask history of fluid intake, food intake
  – Change position: head down, feet up
  – Give fluids, food
  – Take vital signs
  – IV fluids: normal saline
Treatment of Vasavagol/Hypovolumic Reactions

• Prevention:
  – Ask if the donor had breakfast/lunch ask every donor at least to drink a cup of fluid (water or juice) and eat a cooky.

• Early Diagnosis

• Treatment:
For your safety, you are required to remain in the donor area/canteen for at least **15 MINUTES** after your donation!

When you finish donating, the staff member will indicate a time on the blue Post-Donation Instruction Form – this time is the **earliest** time that you can leave the blood drive site and receive your “Thank you for donating” gift.

- When you arrive at the canteen, please print your name below.
- When you are ready to leave, please sign next to your printed name and give the Canteen Staff your blue Post-Donation Instruction Form.

<table>
<thead>
<tr>
<th>To be completed by Donor</th>
<th>Staff ONLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name-Please Print</td>
<td>Signature</td>
</tr>
<tr>
<td></td>
<td>Incentive</td>
</tr>
<tr>
<td></td>
<td>Time (PDIF)</td>
</tr>
<tr>
<td></td>
<td>Time (Departure)</td>
</tr>
<tr>
<td></td>
<td>Initials</td>
</tr>
</tbody>
</table>
DONOR REACTION SUMMARY AND POST-DONATION INFORMATION

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name/ MI</th>
<th>Donor ID</th>
<th>Today’s Date</th>
</tr>
</thead>
</table>

| Home Phone      | Cell Phone     | Other Phone (work / parent / friend) |

### DONOR REACTION SUMMARY

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>Action/ Treatment Provided at Site</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check Here</td>
<td>Check Here</td>
</tr>
<tr>
<td>Fainting</td>
<td>Donation discontinued.</td>
</tr>
<tr>
<td>Falling</td>
<td>Feet elevated.</td>
</tr>
<tr>
<td>Infiltration/bruising</td>
<td>Cold packs applied to the neck.</td>
</tr>
<tr>
<td>Lightheadedness or dizziness</td>
<td>Cold packs applied to venipuncture site.</td>
</tr>
<tr>
<td>Nausea</td>
<td>Drink fluid (juice, water)</td>
</tr>
<tr>
<td>Pain (moderate or severe)</td>
<td>Breathing into paper bag.</td>
</tr>
<tr>
<td>Pale skin</td>
<td>Advised slow/deep breaths.</td>
</tr>
<tr>
<td>Rapid breathing</td>
<td>Fluid administered (IV) ml</td>
</tr>
<tr>
<td>Skin numbness (lips/fingers/tongue)</td>
<td>Physician consult called.</td>
</tr>
<tr>
<td>Sweating</td>
<td>Dr. ___________________________</td>
</tr>
<tr>
<td>Vomiting</td>
<td>911 Called.</td>
</tr>
<tr>
<td>Warm feeling</td>
<td>Donor taken ER: __________________</td>
</tr>
<tr>
<td>Weakness</td>
<td>Vital signs monitored</td>
</tr>
</tbody>
</table>

**Comments:**

**Home Care Instructions**

<table>
<thead>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Drink plenty of fluids (juice, water) to replenish fluid volume lost during donation.</td>
</tr>
<tr>
<td></td>
<td>Apply cold packs to venipuncture site or bruised areas for 15 minutes, 3-4 times for the first 24 hours. Apply warm packs/bath thereafter. Normally the dark blue bruises will gradually turn into yellowish and greenish in color and get larger in size in 1 week.</td>
</tr>
<tr>
<td></td>
<td>Avoid heavy lifting and strenuous activities (i.e. exercise) for 24 hours.</td>
</tr>
<tr>
<td></td>
<td>If you have pain, you can take an over-the-counter oral pain medication.</td>
</tr>
</tbody>
</table>

**Comments:**

If you have any questions or your symptoms persist or worsen after treatment, please contact us at UCLA Blood and Platelet Center (310-794-7217) or Blood Bank (310-825-6551), or visit nearest emergency room.

<table>
<thead>
<tr>
<th>Donor Signature</th>
<th>Date</th>
<th>Witness Signature</th>
<th>Date</th>
</tr>
</thead>
</table>
Allergic Reaction

- Symptoms: itching, coughing, skin rash, sneezing, to wheezing, dyspnea, tachycardia, mucosa swelling, diarrhea
- Management: ask history of allergy, avoid allergy, pause the procedure for severe reactions, notify MD, ask the donor if any medication with him/her, advisee to take benedryl 25-50 mg.
Uncommon Reactions

• Arterial puncture: remove the needle, apply firm pressure, check pulse, skin color
• Nerve injury
• Apheresis-associated reaction: hypocalcemia, hemolysis
The Most Important - Caring Heart
When you have a question, call for help