

Issued by JPAC: 18 October 2022

Implementation: To be determined by each Service

Change Notification UK National Blood Services No. 59 - 2022

Platelet Count

These changes apply to the Whole Blood Donor Selection Guidelines.

Please amend the following entry.

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| Obligatory | 1. Platelet Component Donors: |
| | Must not donate if: |
| | a) The pre-donation platelet count is less than 150 x 109/l. |
| | b) The predicted post-donation platelet count is less than |
| | 100 x 109/I. |
| | c) The platelet count is known to be more than 500 x 109/I. |
| | 2. Whole Blood Donors: |
| | Must not donate if: |
| | a) The platelet count is known to be less than 100 x 109/I. |
| | b) The platelet count is known to be more than 500 x 109/l. |
| | |
| | All donors: |
| | Must not donate if: |
| | a) Under investigation for an abnormal platelet count |
| | b) The platelet count is known to be less than 150 x 10 ⁹ /l. |
| | c) The platelet count is known to be more than 450 x 10 ⁹ /l |
| | |
| | In addition, for Platelet Component Donors only: |
| | in addition, for Flatelet Component Donors only. |
| | Must not donate if: |
| | The predicted post-donation platelet count is less than 100 |
| | x 10 ⁹ /l |
| Discretionary | 1. Platelet Component Donors: |
| | a) If the predicted post-donation platelet count is less than |
| | 100 x 10 ⁹ /l but more than 80 x10 ⁹ /l, discuss with |
| | a 'Designated Clinical Support Officer'. Under exceptional |
| | circumstances and with the donor's informed consent, |
| | accept. |
| | b) If a platelet count of more than 500 x 10 ⁹ /l has been |
| | investigated and no cause that would lead to deferral has |
| | investigated and no cause that would lead to delettal has |









| | been found, with the permission of a 'Designated Clinical Support Officer', accept. a) If a donor has been investigated for an abnormal platelet count and: no underlying cause has been identified that would lead to deferral; and, the donor does not require any monitoring or follow |
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| | up; accept b) If testing by the blood transfusion service finds a donor to have a platelet count which is outside the normal range, the donor can be accepted if their results comply with local policies and procedures. Blood transfusion services should have a written policy for management of donors who are found to have a platelet count of less than 150 x 10 ⁹ /l or more than 450 x 10 ⁹ /l during donation testing. |
| See if Relevant | Haematological Disease Immune Thrombocytopenia Thrombocytosis |
| Additional Information | Taking a platelet donation from a donor with a platelet count lower than 150 x 10 ⁹ /l is unlikely to provide a therapeutic dose. Platelet counts outside of the normal range (i.e. less than $100 \times 10^{9}/l$ 150 x 10 ⁹ /l or more than $500 \times 10^{9}/l$ 450 x 10 ⁹ /l) may be due to an underlying disease process. and should be investigated. High platelet counts can also be associated with iron deficiency. Transfusion services should ensure that, where abnormal platelet counts are identified as part of routine donation testing, these are reviewed and managed appropriately. Further investigation may be required for donors with persistently abnormal results. |
| Information | Part of this entry is a requirement of the Blood Safety and Quality Regulations 2005. |
| Reason for change | The entry has been extended to provide advice for whole blood donors and for all donors with high platelet counts.Relevant links have been added.Clarification of guidance to include donors giving plasma by |
| | apheresis; revision of links in the See if Relevant section; and update of advice for management of donors who have abnormal platelet counts. Addition of requirement for services to have a written policy for management of donors found to have abnormal platelet counts if tested by the blood transfusion service. Discretionary advice allowing platelet donation from donors with a low platelet count in exceptional circumstances has been removed from this entry |









2. Platelet Disorders

| Obligatory | Must not donate if: a) Causes excessive bleeding or bruising. b) The donor has thrombocytosis. c) The donor has thrombocytopenia. d) Taking drugs to reduce platelet function. |
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| Discretionary | If drugs to reduce platelet function are self prescribed (i.e. low dose aspirin), and the donor meets all other criteria and the donation will not be used for platelets, for red cell donation only, accept. |
| See if Relevant | Cardiovascular Disease Haematological Disease Immune Thrombocytopenia Thrombocytosis Platelet Count |
| Additional Information | Bruising and post donation bleeding can be distressing and potentially dangerous. |
| | Platelet counts in excess of 500 x 10 ⁹ /l or less than 100 x 10 ⁹ /l should be repeated. If found to be persistently abnormal, the donor should not be accepted and referred for investigation. |
| | For donors who are identified as having an abnormal platelet count following testing by the blood transfusion service, refer to the 'Platelet Count' entry. |
| Reason for change | Thrombocytosis, thrombocytopenia and taking drugs to reduce platelet function, have been added to 'Obligatory'. |
| | A 'Discretion' has been added for low dose aspirin, |
| | Other relevant links and 'Additional Information' have been added. |
| | Removal of link to Thrombocytosis entry and redirection to the Platelet Count page for donors identified as having an abnormal platelet count if tested by the blood transfusion service. |

3. Thrombocytosis

Delete this entry

A-Z Index:

Redirect the search term 'Thrombocytosis' to the Platelet Disorders entry









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