### Transfusion Reaction Guide

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| Anaphylactic reaction | Hives only | • Stop transfusion; do not disconnect unit  
• Complete PSBC reaction form  
• Not necessary to send samples; check policy |
| Fever ≥38°C, fever with ≥1°C rise or chills | • Obtain orders for antihistamine  
• If reaction resolves, may restart transfusion at slower rate  
• Observe every 15 minutes  
• Request premed with antihistamine, if history of prior allergic reactions |
| Fever with ≥2°C rise, or fever + symptoms of dyspnea, hypotension, tachycardia, chest/back pain or tightness, N/V, rigors, or feeling of impending doom | • Do not restart transfusion  
• Observe closely  
• Request order for acetaminophen for fever, meperidine for chills  
• In recurrently febrile patient, consider transfusing when afebrile or premedication with acetaminophen |
| Dyspnea, fever, hypotension | • Do not restart transfusion  
• Continuous monitoring, including pulse oximetry  
• Request orders for CXR, antibiotics, blood cultures |
| Dyspnea, wheezes, angioedema, hypotension | • Do not restart transfusion  
• Continuous monitoring, including pulse oximetry  
• Request orders for normal saline IV, antihistamines  
• Request premed with antihistamine, if history of prior allergic reactions |
| Stridor, hypotension, airway compromise, hypoxia | • Do not restart transfusion  
• Continuous monitoring, including pulse oximetry  
• Treat as anaphylaxis  
• Call code blue if warranted |
| Dyspnea, hypertension, tachycardia, edema | • Do not restart transfusion  
• Continuous monitoring, including pulse oximetry  
• Supplemental oxygen, if warranted  
• Request orders for CXR, diuretic |

*For severe reactions or further consultation, PSBC has a physician on call 24 hours a day.

Please call (206) 292-6525 and ask to speak to the POC.