

Study Title

When Should we Culture REactions to Detect Bacteria? (SCARED 1)

Study Description

Research Questions:

1. What is the current practice for culturing blood products to work up a suspected STR?

Specifically:

a. How many transfusion reactions reported to the Transfusion Service result in culture of residual unit (i.e. the % transfusion reactions that result in culture being performed on the residual unit)?

b. What is the percentage of cultured units compared to transfused components (i.e. the culture rate by component type)?

c. How do culture rates and criteria differ between institutions?

d. How often are blood cultures drawn on the patient in the setting of suspected STR?

2. What is the yield for culturing residual units? How often are positive culture results deemed by the Transfusion Service physician to be false positive versus true positive based on available information at the time culture results return?

3. How often are suspected STRs that result in unit culture consistent with AABB guidelines?

4. What is the sensitivity and specificity of using the AABB guidelines to culture residual units for suspected STR?

5. Given that hypotension can sometimes be the sole presenting symptom of an STR, could the AABB guidelines be refined to include more specific criteria for hypotension?

Study Status

Completed

Publication Number

130, 145

Teams

CTS

Study Leaders

Dunbar
