



MINISTRY OF HEALTH



Kenya National Blood
Transfusion Service

It's safe and it saves.

Haemovigilance Reporting Tool

Note: This form should be filled in triplicate: Copy 1 original to remain at facility, Copy 2 to be sent to the RBTC or Satellite, Copy 3 to be sent to the KNBTS National office by the RBTC or Satellite.

Name of facility: _____		County: _____
Date DD/MM/YYYY		Report for Month- _____
	Item	Tick
Type of facility	<i>GOK/County</i>	
	<i>Faith Based Organization</i>	
	<i>Private</i>	
		Number
Number of blood units requested from KNBTS in the month.	<i>Whole Blood</i>	
	<i>Packed Red Cells (Adult)</i>	
	<i>Packed Red Cells (Pediatric)</i>	
	<i>Fresh Frozen Plasma</i>	
	<i>Platelet Concentrate</i>	
	<i>Cryoprecipitate</i>	
Number of blood units issued from KNBTS in the month.	<i>Whole Blood</i>	
	<i>Packed Red Cells (Adult)</i>	
	<i>Packed Red Cells (Pediatric)</i>	
	<i>Fresh Frozen Plasma</i>	
	<i>Platelet Concentrate</i>	
	<i>Cryoprecipitate</i>	
Number of blood units transfused by the institution.	<i>Whole Blood</i>	
	<i>Packed Red Cells (Adult)</i>	
	<i>Packed Red Cells (Pediatric)</i>	
	<i>Fresh Frozen Plasma</i>	
	<i>Platelet Concentrate</i>	
	<i>Cryoprecipitate</i>	
Number of cross-matches requested in the month		



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Number of blood units collected by hospital from Family replacement donors		
Number of HTC meetings held in the month		
Number of CMEs/trainings conducted on Blood safety		
Units received from other facilities		
Units issued to other facilities		
Number of units discarded		
Number of units with discrepant grouping results		
Post transfusion adverse reactions	<i>Near miss event</i>	
	<i>Mild/moderate adverse reactions</i>	
	<i>Severe adverse reactions</i>	
Cold Chain Monitoring	<i>Complete forms</i>	
	<i>Incomplete forms</i>	
Is there a dedicated	<i>Blood bank Fridge for blood alone</i>	
	<i>Blood Bank Freezer for components alone</i>	
Does your facility have an IPC committee	<i>Yes /No</i>	
Are the following Policies and Guidelines available at your facility <ol style="list-style-type: none"> 1) Policy Guidelines on Blood Transfusion in Kenya 2) Hemovigilance guidelines 3) Appropriate use of blood and blood products 4) Infection Prevention Guidelines 5) Health care Waste Management Guidelines 	<i>Yes/ No</i> <i>Yes/ No</i> <i>Yes/No</i> <i>Yes/No</i> <i>Yes/No</i>	

