GOVERNMENT OF INDIA MINISTRY OF HEALTH AND FAMILY WELFARE DEPARTMENT OF HEALTH AND FAMILY WELFARE

LOK SABHA UNSTARRED QUESTION NO.1123 TO BE ANSWERED ON $4^{\rm TH}$ DECEMBER, 2015

TRANSFER OF BLOOD BETWEEN BLOOD BANKS

1123. SHRI SUMEDHANAND SARSWATI:

SHRI VIJAY KUMAR HANSDAK:

SHRI PRALHAD JOSHI:

SHRI CHANDRA PRAKASH JOSHI:

SHRIMATI SANTOSH AHLAWAT:

Will the Minister of **HEALTH AND FAMILY WELFARE** be pleased to state:

- (a) the number of blood banks in public and private sector in the country, State/UT-wise;
- (b) whether the Government has recently granted permission for transfer of blood from one blood bank to another and issued guidelines for the purpose;
- (c) if so, the details thereof along with the extent to which the move is expected to address the shortage of blood in the country; and
- (d) the other measures being taken by the Government for better storage and utilisation of blood and blood components in the country?

ANSWER THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SHRIPAD YESSO NAIK)

- (a): The number of blood banks in public and private sector in the country, State/UT-wise; as per information submitted by DCG(I) is at Annexure-I
- (b): Yes.
- (c): Policy of transfer for Blood from one blood bank to another has been approved so as to avoid wastage of surplus bloods in some blood banks, and mitigate scarcity of blood in other blood banks. The detail guidelines for transfer are placed at Annexure-II.
- (d): Another policy decision has also been taken to allow for exchange of surplus plasma available with indigenous fractionators for fractionation and derivation of essential plasma derived medicine like human albumin and clotting factors.

Clinicians are also provided training on appropriate use of blood and blood components for optimal usages.

 $\underline{\textbf{Annexure-I}}$ Number of licensed blood bank in India State / UT wise up to Nov. 2015

S.NO	NAME OF STATE	Public including Govt. Blood Banks	Private including charitable trust Blood Bank	TOTAL
1	Andaman & Nicobar	2	1	3
2	Andhra Pradesh	32	93	125
3	Arunachal Pradesh	9	1	10
4 *	Assam	37	28	65
5 *	Bihar	32	35	67
6	Chandigarh	3	1	4
7	Chhattisgarh	19	30	49
8	Dadra & Nagar Haveli	-	1	1
9	Daman & Diu	1	1	2
10	NCT of Delhi	22	47	69
11	Goa	3	1	4
12	Gujarat	30	106	136
13	Haryana	26	50	76
14	Himachal Pradesh	19	3	22
15	Jammu & Kashmir	29	4	33
16	Jharkhand	26	18	44
17 *	Karnataka	39	144	183
18	Kerala	43	140	183
19	Lakshadweep	1	0	1
20	Madhya Pradesh	54	90	144
21	Maharashtra	74	236	310
22	Manipur	4	1	5
23	Meghalaya	5	2	7
24	Mizoram	8	2	10
25 *	Nagaland	5	-	5
26 *	Odisha	63	20	83
27	Pondicherry	3	10	13
28 *	Punjab	48	53	101
29 *	Rajasthan	48	54	102
30	Sikkim	2	1	3
31	Tamil Nadu	102	198	300
32 *	Telangana	27	113	140
33	Tripura	6	2	8
34 *	Uttar Pradesh	100	142	242
35	Uttarkhand	20	8	28
36	West Bengal	81	39	120
	Total	1023	1675	2698

^{*}Data up to Feb.-2015

Annexure-II

Bulk transfer of blood and blood components amongst licensed blood banks in the country would henceforth be allowed under the following conditions:-

- I. Transfers shall be allowed between licensed blood banks in any sector (Public, NGO, and Private).
- II. Transfer of blood and components in bulk shall be permitted across State borders to also ensure the availability at the point of need.
- III. All transfers shall be done at the recommended temperature and as per prescribed storage conditions for whole blood and components. The supplier blood bank shall be responsible for compliance thereof.
- IV. The recipient blood bank should have the capacity to hold the units requested for, at appropriate temperature till the time of utilization.
- V. Broad based donor consent should be incorporated in the standard donor form to ensure that the donor agrees to his blood unit being utilized beyond the blood bank where it is donated.
- VI. The supplier blood bank can levy the prescribed processing charges on the patient/recipient/recipient blood bank as per NBTC norms. However, the recipient blood bank can levy only processing charging for compatibility testing (cross-matching), in addition to charges levied by the supplier blood bank, from the patient/recipient for such transferred units.
- VII. Only one transfer shall be allowed, and recipient blood bank cannot further transfer units obtained from another blood bank except to another blood storage center or a patient/recipient.
- VIII. Records of traceability shall be retained throughout the process.
- IX. Supplier blood bank would be responsible for all the complications except for those related to compatibility testing, which will be the responsibility of the recipient blood bank. Recipient blood bank shall report and evaluate all the adverse transfusion reactions, including those happening due to blood that has been transferred from supplier blood bank.
- X. Documents accompanying transfer shall include TTI testing report and record of transport in appropriate temperature.
- XI. All recipient blood banks are considered deemed approved to act as functional storage centers for blood and blood components, even though the upper limit of 2000 units utilization per annum is not applicable.
- XII. All blood banks and storage units be instructed to issue blood to all patients needing transfusion and not restricting blood issue to captive requirements of institution to which they are attached.
- XIII. Blood banks would be informing regarding bulk transfers to SBTC and in case of inter-state bulk transfers to NBTC.