



SREE GOKULAM MEDICAL COLLEGE & RESEARCH FOUNDATION

(A UNIT OF FOUNDATION OF NON-RESIDENT INDIANS)

SGMCRF/C1/Hospital Transfusion Committee/2016

22/01/2024

PROCEEDINGS OF THE PRINCIPAL

Sub : Hospital Transfusion Committee re -constituted – reg.

The Hospital Transfusion Committee of the college is re-constituted with the following members w.e.f 20/01/2024.

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| 1. Medical Superintendent | Chairperson |
| 2. Deputy Medical Superintendent | Member |
| 3. Dr. Jasmin, Medical Officer in-charge of Blood Bank | Convener |
| 4. Dr. Linu S M, Associate Professor, Dept. of Emergency Medicine | Member |
| 5. Dr. Jarlin John, Asso. Professor, Dept. of Medicine | Member |
| 6. Mr. Navas, ICU Complex in-Charge | Member |
| 7. Mrs. Santha Nair, Nursing Superintendent | Member |
| 8. Mrs. Deepa S , Technical Supervisor, Blood Bank | Member |


PRINCIPAL

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Sree Gokulam Medical College &
Research Foundation, Venjaramoodu
Thiruvananthapuram-695 607



Sree Gokulam Medical College & Research Foundation

Hospital Transfusion Committee

1. Composition of the Committee

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|---|-------------|
| a. Medical Superintendent | Chairperson |
| b. Deputy Medical Superintendent | Member |
| c. Medical Officer In-charge of Blood Bank | Convener |
| d. Representative from the Department of Emergency Medicine | Member |
| e. Representative from the Department of General Medicine | Member |
| f. Representative from the Department of General Surgery | Member |
| g. Chief Nursing Superintendent | Member |

2. Statement of Purpose

Hospital Transfusion Committee is a multi-disciplinary team sponisible for whole transfusion chain from the donor to the patient and maintaining safe transfusion practices following standard guidelines.

3. Functions of the Committee:

- 3.1. Develop system for implementation of national guidelines within the hospital.
- 3.2. Develop and regularly review policies, procedures and guidelines covering the patient's blood management in accordance with the national guidelines.

- 3.3. Monitor, report and investigate transfusion adverse events and near misses.
- 3.4. Monitor and review blood component wastage and develop strategies for reduction and improvements.
- 3.5. Identify staff training requirements in clinical and laboratory transfusion practices.
- 3.6. Monitor blood ordering practices; use and wastage statistics; errors and incidents.

4. Frequency of Meetings:

Once in 6 months and as required.

5. Tenure of the Committee:

Committee functions for a tenure of three years.