





Places are still available for the Annual SHOT Symposium on Friday 11 July at the Birmingham Hilton Metropole

Click here to register for the 2025 Annual SHOT Symposium

- Early bird rates will be available for registrations where payment is received by **Friday 30 May**
- To enquire about sponsorship or exhibitor opportunities please contact:
 <u>SHOT.Symposium@nhsbt.nhs.uk</u>
- Don't miss your chance to submit an abstract! This is a valuable opportunity to showcase your quality improvement projects or examples of learning from excellence or audit/research projects.
- ★ The deadline for abstract submission is <u>Friday 18</u> <u>April 2025</u>





Click here for Instructions for abstract submission

Click here to submit an abstract to the 2025 Annual SHOT Symposium













New HFIT Tuition Package

SHOT recognises it can be difficult for investigators and reporters to consider the human factors (HF) aspects of an incident and has provided a self-learning tuition package to help improve the quality of HF.

We have released a new HFIT Tuition package for 2025, which is now available on the SHOT website.

Please click here or the image below to access the new HFIT tuition package.

Useful tips for the SHOT Human Factors (and Ergonomics) Investigation Tool (HFIT)





This resource provides information to help understand the causal and contributory factors related to the transfusion events being reported to SHOT from a Human Factors and Ergonomics perspective

> For gueries contact 0161 423 4208 or shot@nhsbt.nhs.uk

> > For use in 2025

New for 2025

Serious Hazards of Transfusion

Inclusion of neutral language

List of example contributory factors available for each category

New section added to record actions & rate their effectiveness















MTE Virtual Sessions



Join us for interactive 'Meet The Experts' sessions on Zoom

Incorrect Blood Component Transfused Wednesday 21 May 2025 at 13:00 GMT

Click here to register for this event

Near Miss Reporting & WBIT Monday 09 June 2025 at 13:00 GMT Click here to register for this event



A 20-minute overview of chapter content:

Including trends, highlights and example cases



Followed by 40-minute Q&A:

We want to hear from you!

- What are your urgent questions?
- How have you improved practice in your area?



Important note: To get the most out of the session, please read the relevant chapter from the latest <u>Annual SHOT</u>

Report, come prepared with any queries you have for our experts, or email them to the SHOT team beforehand: shot@nhsbt.nhs.uk

Human Factors Monday 20 January 2025

Click here to watch the recording

Laboratory Errors
Thursday 06 March 2025

Click here to watch the recording

Paediatric Cases Wednesday 09 April 2025 Click here to watch the recording













SCRIPT Resources update

Click here or on the image to access an article by Dr Jeni Davies published in ISBT magazine Transfusion Today (Issue 412, January 2025).

In Focus

Educational resources in information technology

Understanding the functionality and interoperability of IT systems

Have a look at the **SCRIPT Resources** page for more:



New SHOT Bite No 05(b) - Investigating FAHR

The Investigating FAHR SHOT Bite has been updated.

Click here or click the image to access the new **Investigating FAHR SHOT** Bite.

Please contact us at shot@nhsbt.nhs.uk if you have any feedback on existing SHOT Bites or other resources, and ideas for new SHOT Bites or other SHOT resources.

SHOT Bite No. 5b

Investigations in Febrile, Allergic and Hypotensive Reactions

Serious Hazards of Transfusion

SHOT reports reveal that 40% of platelet reactions and 40% of allergic reactions are investigated inappropriately with serological tests. This SHOT bite aims to clarify which investigations are needed following a febrile, allergic or hypotensive reaction.

The first step is to correctly classify the reaction as febrile, allergic or hypotensive (see shot bite no. 05a: FAHR - getting the diagnosis right)

Febrile	Allergic	Hypotensive
Temperature rise and/or inflammatory symptoms such as rigors, nausea, myalgia, shortness of breath without wheeze	Flushing, urticaria/rash, angio-oedema, wheeze, stridor, hypotension (anaphylaxis)	Isolated fall in systolic blood pressure of 30mmHg or more AND systolic blood pressure of 80 mmHg or less within 1 hour of completing transfusion and no anaphylactic symptoms

When should serological investigations (repeat group & screen/ DAT/ crossmatch) be sent?

Serological tests are only required for febrile or hypotensive type reactions involving red cells, where the reaction is severe enough to warrant stopping transfusion.

	Red cells	Platelets	Plasma products
Febrile	\	×	×
Allergic	*	×	×
Hypotensive	\	×	×

Where reactions warrant serological investigations, basic screening tests (full blood count, renal function, liver enzymes), coagulation screen and haemolysis screen (LDH, haptoglobin, urine for haemoglobin) should also be sent.

















New SHOT Videos published!

Tools supporting safe and effective communications

Education Safety Videos Videos/webinars



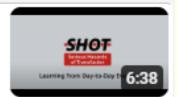
Learning from transfusion related deaths

Education Videos Videos/webinars



Learning from day-to-day events

Education Safety Videos Videos/webinars



Holistic approach to safety

Education Safety Videos Videos/webinars



<u>Learning from excellence in transfusion</u>

Education Videos Videos/webinars



Forthcoming events

Forthcoming events where SHOT is presenting sessions, posters, oral abstracts. Click on the images for more information.









If you would prefer not to receive haemovigilance communications from SHOT, then please email SHOT.unsubscribe@nhsbt.nhs.uk and you will be removed from the distribution list.