



SREE GOKULAM MEDICAL COLLEGE & RESEARCH FOUNDATION

(A UNIT OF FOUNDATION OF NON-RESIDENT INDIANS)

Recognized by National Medical Commission & Affiliated to KUHS
Accredited by NABH



SGMCRF/C1/Hospital Transfusion Committee/2016

19/09/2024

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 17/09/2024.

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. Col T P Baby, Cheif Nursing Officer	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

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.