

Blood Banking/Transfusion Medicine CC Exam Module Study Guide

Registrants for the BB/TM only or combined Primary/BB/TM CC exam have only a single 150-question BB/TM module. The module's topic list extends across both page 1 & 2.

CC BB/TM – Blood Banking/Transfusion Medicine (Mandatory 150-Question Module)	
• 2,3 DPG in stored blood	• IV fluids compatible with blood components
• ABO typing change	• IVIG indications
• additives for red cell preservation	• leukocyte reduction; donor characteristics
• albumin; ACE inhibitors; transfusion reactions	• massive transfusion; Rh compatibility
• allergic reaction risk reduction	• maternal antibody formation in pregnancy
• allogeneic bone marrow transplant; donor matching	• naturally occurring antibodies
• allogeneic stem cell transplant; engraftment	• neonatal alloimmune thrombocytopenia treatment
• alloimmunization risk	• neonatal transfusion
• anaphylactic transfusion reactions due to anti-IgA; prevention	• neonatal transfusion increments
• antibody identification; lowering pH	• newborn exchange transfusion; compatible blood
• autoimmune hemolytic anemia; transfusion risks	• newborn; weakly positive DAT
• bacterial contamination of blood products; Yersinia	• one volume plasma exchange calculation
• bacterial contamination of platelets	• Parvovirus B19 transmission
• blood donor with bacteremia	• passinger lymphocyte syndrome
• blood salvage program standards	• physiologic adaptations to blood loss and anemia
• CAR T-cell therapy	• plasma transfusion indications
• cell panel; ABO discrepancy	• platelet alloimmunization
• cell panel; alloantibodies; emergency transfusion	• platelet storage errors
• cell panel; Anti-K	• platelet transfusion efficacy
• cell panel; high frequency alloantibodies	• platelet transfusion refractoriness
• cell panels; alloantibody identification	• platelet transfusion; crossmatch
• cell panels; warm autoimmune hemolytic anemia	• platelet transfusions; post-transfusion platelet count increment calculations
• chronic granulomatous disease; acanthocytes	• platelet transfusions; survival time
• CMV risk of blood products	• PNH; transfusion
• coagulation factors in cryopoor plasma vs. FFP	• positive Ab screen, negative DAT
• compatibility testing; antiglobulin phase	• positive autologous control; neg antibody screen
• complement binding alloantibodies	• positive DAT; elution studies
• cryoprecipitate; features	• post-surgical bleeding
• delayed hemolytic reaction; blood smear findings	• post-HPC transplant microangiopathic thrombotic disorders
• donor criteria; plateletpheresis	• post-transfusion increment, factor IX
• donor deferral criteria	• posttransfusion purpura
• donor deferral; malaria prophylaxis	• posttransfusion sepsis; risk reduction
• donor deferral; rabies vaccine	• preprocedure blood components; thoracentesis/paracentesis
• donor evaluation; medications	• preprocedure warfarin reversal
• donor reactions	• preservative solutions for RBC storage
• donor reactions; long term effects of donation; iron deficiency anemia	• rare blood types; thawed time to transfuse
• donor reactions; vasovagal	• RBC antigens most likely to induce alloantibodies in males
• donor testing; repeatedly reactive infectious disease tests	• RBC transfusion threshold; pediatrics

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• drug induced immune hemolytic anemia	• RBCs stored in AS-1; hematocrit
• eluate Rh reactivity	• recombinant factor VIIa; FDA approved indications
• emergency transfusion; adverse reaction	• repeat ABO typing, outside blood
• emergency transfusion; mixed field agglutination	• Rh (D) mother; weak D infant; management
• emergency transfusion; Rh incompatible	• Rh IG infusion in ITP; hemoglobin concentration
• Factor VIII deficiency; laboratory tests	• Rh IG; standard dose
• Factor IX deficiency; treatment of bleeding	• Rh typing; AHG anti-D testing
• febrile transfusion reaction; premedication	• selection of compatible units
• fetal-maternal transfusion; RBC incompatibility	• serum neutralization with Le(a) and Le(b)
• FFP separation and storage	• sickle cell disease crisis; treatment
• FFP; indications	• sickle cell disease; hyperhemolytic syndrome
• FFP; prophylactic use	• solvent-detergent viral inactivation
• frozen RBCs; expiration	• therapeutic apheresis for drug removal; pharmacokinetics
• frozen RBCs; reuse	• therapeutic apheresis; acute graft versus host disease
• graft-vs-host risk; HLA	• therapeutic apheresis; volume removed
• hemolytic disease of the fetus/newborn risk; maternal & paternal Rh types	• therapeutic plasma exchange; TTP
• hemolytic disease of the fetus/newborn; alloantibodies	• TRALI
• hemolytic disease of the fetus/newborn; Doppler ultrasound	• TRALI; CBC
• hemolytic disease of the fetus/newborn; not Rh; not ABO	• TRALI; prevention
• hemolytic transfusion reaction; passive antibodies	• transfusion associated GVHD vs. allogeneic HPC transplant associated GVHD
• hemolytic transfusion reaction; prevention	• transfusion induced iron overload; chelation therapy
• hemolytic transfusion reaction; treatment	• transfusion of units with broken seal
• hemolytic transfusion reactions	• transfusion trigger; coronary artery disease
• HTLV transmission risk	• transfusion-associated circulatory overload
• hydrops fetalis; alloantibodies	• transfusion-related fatality reporting
• hypoproliferative thrombocytopenia; GI bleeding	• transfusion-transmitted infections; intravascular hemolysis
• incompatible crossmatch; emergency transfusion	• trauma; group O transfusion
• indications for irradiation of blood components	• unexpected antibodies; gel technology
• individual classified as Rh positive donor/Rh negative recipient	• unexpected antibody screening cells; reagent Rh phenotypes
• intraoperative salvage standards	• universal leukocyte reduction; impact
• irradiation; storage of blood products	• urgent warfarin reversal
• ISBT 128	• West Nile Virus; NAT testing
• ITP; indications for platelet transfusions	• whole blood collection; AABB standards