MOC BB/TM – Blood Banking/Transfusion Medicine (Mandatory 150-Question Module)	
• 2,3 DPG in stored blood	• ISBT 128
• ABO typing change	• ITP; indications for platelet transfusions
• additives for red cell preservation	• IV fluids compatible with blood components
• albumin; ACE inhibitors; transfusion reactions	• IVIG indications
• allergic reaction risk reduction	• Kleihauer-Betke; fetomaternal hemorrhage
• allogeneic bone marrow transplant; donor matching	• leukocyte reduction; donor characteristics
• allogeneic bone marrow transplant; transfusion support	• massive transfusion; Rh compatibility
• allogeneic stem cell transplant; engraftment	• maternal antibody formation in pregnancy
• alloimmunization risk	• neonatal alloimmune thrombocytopenia treatment
• anaphylactic transfusion reactions due to anti-IgA; prevention	• neonatal transfusion
• antibody identification; lowering pH	• neonatal transfusion criteria
• autoimmune hemolytic anemia; transfusion risks	• neonatal transfusion increments
• bacterial contamination of blood products; Yersinia	• newborn exchange transfusion; compatible blood
• bacterial contamination of platelets	• one volume plasma exchange calculation
• blood donor with bacteremia	• Parvovirus B19 transmission
• blood salvage program standards	• physiologic adaptations to blood loss and anemia
• bone marrow transplant; incomplete engraftment	• plasma transfusion indications
• cell panel; ABO discrepancy	• platelet alloimmunization
• cell panel; alloantibodies; emergency transfusion	• platelet storage errors
• cell panel; Anti-K	• platelet storage lesions
• cell panel; high frequency alloantibodies	• platelet transfusion efficacy
• cell panels; alloantibody identification	• platelet transfusion refractoriness
• cell panels; warm autoimmune hemolytic anemia	• platelet transfusion; crossmatch
• chronic granulomatous disease; acanthocytes	• platelet transfusions; post-transfusion platelet count increment calculations
• coagulation factors in cryopoor plasma vs. FFP	• platelet transfusions; survival time
• compatibility testing; antiglobulin phase	• PNH; transfusion
• complement binding alloantibodies	• positive Ab screen, negative DAT
• cryoprecipitate; features	• positive autologous control; neg antibody screen
• delayed hemolytic reaction; blood smear findings	• positive DAT; elution studies
• Donath-Landsteiner antibody	• post-surgical bleeding
• 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 population characteristics	• rare blood types; thawed time to transfuse
• donor reactions	• RBC antigens most likely to induce alloantibodies in males
• donor reactions; long term effects of donation; iron deficiency anemia	• RBC transfusion threshold; pediatrics
• donor reactions; vasovagal	• RBCs stored in AS-1; hematocrit
• donor testing; repeatedly reactive infectious disease tests	• recombinant factor VIIa; FDA approved indications
• drug induced immune hemolytic anemia	• repeat ABO typing, outside blood

• eluate Rh reactivity	• Rh (D) mother; weak D infant; management
• emergency transfusion; adverse reaction	• Rh IG infusion in ITP; hemoglobin concentration
• emergency transfusion; Rh incompatible	• selection of compatible units
• febrile transfusion reaction; premedication	• serum neutralization with Le(a) and Le(b)
• fetal-maternal transfusion; RBC incompatibility	• sickle cell disease crisis; treatment
• FFP storage	• sickle cell disease; hyperhemolytic syndrome
• FFP; indications	• solvent-detergent viral inactivation
• FFP; prophylactic use	• therapeutic apheresis for drug removal; pharmacokinetics
• frozen RBCs; reuse	• therapeutic apheresis; acute graft versus host disease
• graft vs host; pathophysiology	• therapeutic apheresis; volume removed
• graft-vs-host risk; HLA	• therapeutic plasma exchange; TTP
• granulocyte transfusions; allogeneic BM transplant candidate	• TRALI
• hemolytic disease of the fetus/newborn risk; maternal & paternal Rh types	• TRALI; CBC
• hemolytic disease of the fetus/newborn; alloantibodies	• TRALI; prevention
• hemolytic disease of the fetus/newborn; Doppler ultrasound	• transfusion associated GVHD vs. allogeneic HPC transplant associated GVHD
• hemolytic disease of the fetus/newborn; not Rh; not ABO	• transfusion induced iron overload; chelation therapy
• hemolytic transfusion reaction; passive antibodies	• transfusion of units with broken seal
• hemolytic transfusion reaction; prevention	• transfusion trigger; coronary artery disease
• hemolytic transfusion reaction; treatment	• transfusion-associated circulatory overload
• hemolytic transfusion reactions	• transfusion-related fatality reporting
• heparin induced thrombocytopenia	• transfusion-transmitted infections; intravascular hemolysis
• HTLV transmission risk	• trauma; group O transfusion
• hydrops fetalis; alloantibodies	• Trypanosoma cruzi; epidemiology; transmission
• hypoproliferative thrombocytopenia; GI bleeding	• unexpected antibodies; gel technology
• incompatible crossmatch; emergency transfusion	• unexpected antibody screening cells; reagent Rh phenotypes
• indications for irradiation of blood components	• universal leukocyte reduction; impact
• individual classified as Rh positive donor/Rh negative recipient	• urgent warfarin reversal
• intraoperative salvage standards	• von Willebrand disease; treatment
• irradiation; storage of blood products	• West Nile Virus; NAT testing