RCC, with low concentration of leukocytes (cells responsible for transmission of cell-associated infectious agents, febrile non-hemolytic transfusion reactions, etc.), which can lead to significant benefits by reducing adverse transfusion reactions, potentially shortening hospital stays, and decreasing the potential additional costs related to complications. In summary, LD-RCC preparation met or exceeded local and international quality control standards.

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QUALITY CONTROL EVALUATION OF LEUCODEPLETED PLATELET CONCENTRATES PREPARATION WITH BUFFY COAT POOLING METHODE IN GSH BLOOD BANK IN SAO PAULO, BRAZIL

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Objective: To evaluate the quality of leukodepleted platelet concentrates (LDPC) obtained from the buffy coat pooling method from the whole blood (WB) collected and processed in GSH blood bank Sao Paulo (SP), during April - June 2024, verifying local and the European Directorate for the Quality of Medicines & HealthCare (EDQM) Blood Guide. **Material and methods:** WB units were collected using Top and bottom (T&B) quadruple CDP/SAGM with in-line filter bags (n = 84, 450 ml), (LQT610L® system Macopharma; France) in GSH Blood Bank, SP, Brazil, between April - June 2024. WB was centrifuged on day 0 at 3,500 rpm (Sorval RC 3C Plus) for 15 min. Blood components were separated with a Fractiomatic Plus 2 blood separator (Grifols, Spain). After T&B processing, 4 Buffy Coats (BCs) (ABO compatible, overnight rest) were pooled and mixed with 1 plasma unit, using a BC pooling system with in-line filtration (TRV806L, Macopharma) and sterile connector device (TSCD, Terumo, Japan). BC Pools were centrifuged at 1450 rpm × 6:00 min and separated to obtain leukodepleted platelet concentrates (LDPC) (n = 21), which were measured for final volume, platelet count after two hours of resting (Cell Dyn- Emerald, Abbot), residual leukocytes (rWBC) (Nageotte camera, Blaubrand), pH (potentiometer) and microbiological culture (manual). **Results:** Volume values of LDPC suspended in plasma were 333.47 ml (198 – 374 ml), with platelet recovery on day 1 of 3.01×1011/unit (2.05 – 4.25), aligned with the local requirements (> 3.0 × 1011/unit). Also, the obtained platelet recovery percentages are within the specified limits: 77% average (62% – 108%). For leukoreduction, the results meet the terms with local and international (EDQM) requirements (< 1 × 106/unit), with an average value of 0.023x 106/unit (0.0116 - 0.0707). pH measure presented a mean value of 7.18 (6.41-7.93) (n = 18), aligned with acceptance criteria (> 6.4). Finally, 100% of microbiological cultures were negative, ensuring the safety of the preparation method. **Discussion:** The widespread adoption of the buffy coat (BC) method for platelet preparation is evident in numerous countries. The present evaluation demonstrated that this type of implementation could be accomplished in Brazilian blood centers. Leukodepleted platelet concentrates (LDPCs), produced during the validation phase, adhered to local and European standards, specifically the European Directorate for the Quality of Medicines (EDQM, 2023), regarding platelet count and leukocyte reduction. While it is well-recognized that Brazil predominantly use the 'top and top'(T&T) method for producing platelet-rich plasma (PRP), the BC pooling approach presents a viable alternative to optimizes resources, requiring merely four donors to yield a therapeutic platelet dose, and ensuring superior quality, attributable to the leukodepletion filter and the integrity of a closed system. **Conclusion:** The Thromboflex® TXP system is a method for producing LDPCs from BC pooling that meets the local and EDQM standards. Quality indicators confirmed the production of international standardized platelet products, establishing whole blood-sourced, buffy coat pooled platelets as a reliable method to ensure the blood supply at the GSH blood bank.

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MODELO DE ENVIO DE PLASMA À INDÚSTRIA E SEUS PRIMEIROS RESULTADOS

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Para que um banco de sangue possa doar o plasma para a produção de hemoderivamos, a Hemobrás, em conjunto com a Octapharma, realizam um processo de qualificação do serviço. O alto volume de descartes de plasma do Instituto de Hematologia e Hemoterapia de Sergipe (IHHS), motivou o contato com a Hemobrás para dar início ao processo de qualificação. Objetivou-se evidenciar o processo de qualificação do IHHS para doação de plasma para a Hemobrás. Trata-se de um estudo descritivo e exploratório, realizado no período de outubro de 2023 a junho de 2024. O 1°contato do IHHS com a Hemobrás foi em outubro de 2023, quando foram enviados os dados de produção e descarte para análise. Após uma fase de evidências documentais, foi realizada a 1ªauditoria presencial da Hemobrás e Octapharma em dezembro de 2023, que constatou algumas necessidades de melhorias e gerou um plano de ação com 24 (100%) itens, com prazo de 21 dias para ser finalizado. Dentre as melhorias, estão a necessidade de qualificação dos freezeres de congelamento de plasma, a validação dos processos de produção de hemocomponentes e dos equipamentos utilizados para a aferição de hemoglobina e hematócrito dos doadores de sangue. Resultados e discussão: O plano de ação foi enviado para a Hemobrás em janeiro de 2024, tendo um atingimento de 18 (75%) itens conformes, com pendências inerentes ao processo de qualificação dos freezeres de congelamento, sendo necessária a compra de um frezeer Indrel -80°C, a validação do processo de congelamento de plasma neste novo equipamento, a instalação de um sistema informatizado de monitoramento de temperatura dos