


# Transfusion associated circulatory overload


## – is your patient at risk?


### TACO TRANSFUSION ASSOCIATED CIRCULATORY OVERLOAD

Is your patient at risk?

#### ASSESSMENT

 Does the patient have pre-existing cardiac dysfunction?  
Is the patient on a regular diuretic?

 Is the patient known to have pulmonary oedema?  
Does the patient have any respiratory symptoms of undiagnosed cause?

 Is the fluid balance positive?  
Is the patient receiving continuous IV fluids (current or within last 24 hours)?  
Is there any peripheral oedema?

#### PREVENTION

If YES to any of the above:

- Review the need for transfusion, should/can it be deferred?
- Transfuse one unit and review.
- Administer at a slow rate.
- Measure the fluid balance.
- Consider a prophylactic diuretic.
- Monitor the patient closely

**Please note:** you may find swing tags highlighting the risks of transfusion-associated circulatory overload (TACO) attached to units of red blood cells during September.

These tags are designed assist clinical staff to recognise patients at risk of TACO.



The 2016 Serious Hazards of Transfusion (SHOT) report found TACO contributed to 14 deaths and 18 cases of major morbidity in the reporting period.

In their key messages and recommendations they noted TACO is the most common cause of death and major morbidity and may be preventable.



Serious Transfusion Incident Report (STIR) collects information on Australian transfusion reactions, incidents and near misses. In the upcoming STIR annual report to be published there were only 10 reports of TACO, with no attributed deaths. This low number is most likely due to under-reported events and hence our awareness campaign.

Thank you for your support with this project to increase awareness of TACO and increase the safety of blood transfusion for our patients.

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