

Cold Stored Platelets (CSPs) FAQs

What is the clinical indication for CSPs?

Our variance states that CSPs “are approved for the treatment of actively bleeding patients through day 14 of storage when conventional platelet products are unavailable or their use is not practical.”

Therefore, these platelets can be used for many clinical indications ranging from maternal hemorrhage, surgical bleeding, traumatic hemorrhage, GI bleed, etc. We recommend having a plan for those hospitals that will have a dual inventory so that these products are used appropriately. Examples: use CSPs for trauma fridge, MTPs, OR coolers, etc.

How are CSPs stored?

CSPs are stored in the refrigerator/cooler “at 1-6°C for up to 14 days without agitation.” There are no requirements for how they must be stored in the refrigerator, and this is up to each facility based on individual storage capabilities. From our experience, metabolism is slowed in these products- the average pH of 10 products was 6.9, with a range of 6.6-7.1 after 14 days of cold storage.

Because these products are stored at cold temperature, they will not need to undergo bacterial testing. Please follow AABB standards for storage and transportation temperature requirements.

How should CSP be transfused?

CSPs can be transfused just like any other blood component. Each facility should follow their own return policy as they do for other blood components in this same temperature range (i.e. discard if received back out of temp).

You can use the same platelet filter that you currently use for room temperature platelets for transfusion of CSPs. As with other products, transfuse within 4 hours.

What will CSPs look like?

They will look similar to room temperature platelets, but they will have a new tag to indicate their cold storage temperature. You are welcome to add additional stickers to help with staff and nursing education, as needed.

What about platelet aggregates and visual inspection?

Platelet aggregates may be present (and are even expected) because platelets are activated at cold temperatures. Some studies have shown that these aggregates will not affect the efficacy of the product even after bedside filtration.

Follow your usual protocol for visual inspection to avoid potentially contaminated products.

What is the HCPCS code for CSPs?

There is no unique HCPCS code for CSP. Please apply the same billing codes as applicable for leukoreduced apheresis platelets.

Will my facility receive cold –stored platelets?

Some facilities may maintain a cold-stored platelet onsite, while others may receive a CSP when placing a STAT order for a platelet. Hospital services will qualify at time of order confirmation if a CSP will be shipped. Regardless of the situation, all facilities should be prepared to accept a cold-stored platelet to meet patient needs when clinically indicated effective September 27, 2021.

What scientific information is available for more information about CSPs?

Please refer to this excellent review which discusses both historical and current literature regarding CSPs (available on google scholar):

Reddoch-Cardenas KM, Bynum JA, Meledeo MA *et al.* Cold-stored platelets: A product with function optimized for hemorrhage control. *Transfusion and Apheresis Science*. 2019; 58: 16-22.