Dosage:
The VUMC blood bank maintains two distinct cryoprecipitate products. Adult patients will receive pre-pooled units of cryoprecipitate, these units contain 5 individual cryo units. Providers caring for adult patients can order pre-pooled cryoprecipitate in increments, with a traditional order of 2 pre-pooled cryoprecipitate units for an adult patient.

Pediatric patients at VUMC receive cryoprecipitate via individual units according to weight based transfusion guidelines (recommended 10-15 mL/kg).

Orders for cryoprecipitate that deviate from this algorithm - as well as orders for cryoprecipitate for patients without a recent fibrinogen level document in Starpanel - are flagged for review by the blood bank resident and/or the medical director.

Introduction:

According to standards set by the AABB, each unit of cryoprecipitate must contain at least 150 mg of fibrinogen. Cryoprecipitate also contains at least 80 IU of Factor VIII and appreciable amounts of von Willebrand Factor (vWF) and Factor XIII. Cryoprecipitate does not contain appreciable amounts of the other clotting factors.

Indications:
The most common indication for cryoprecipitate transfusion is hypofibrinogenemia, usually in the setting of DIC or major surgery but occasionally due to hereditary hypofibrinogenemia. Less commonly, cryoprecipitate has been used to provide factor replacement in Factor XIII deficiency. Please note, that human factor XIII concentrates are FDA approved for maintenance therapy (www.corifact.com). Cryoprecipitate should NOT be used for treatment of hemophilia A (Factor VIII deficiency) or von Willebrand’s disease. Vanderbilt discourages the use of cryoprecipitate as a post-surgical fibrin sealant.

Special Information
Unlike RBCs, platelets, and FFP, once cryoprecipitate is thawed, it cannot be re-stocked (re-frozen) by the blood bank. Please do not order this product in anticipation of returning unused portions.