Cord Blood Bank Technology Survey 2017

Response ID:67 Data

1. ...

1. General data

Name of the Cord Blood Bank:

DE-ERL

2.

2. In what year did your Cord Blood Bank start collecting cord blood units?

1999

3. Type of cord blood units in the inventory of your Cord Blood Bank (please note the number of cord blood units stored on December 31, 2016).

Cord Blood Units in inventory for Unrelated Allogeneic. : 1563 Cord Blood Units in inventory for Related Allogeneic (directed). : 4 Cord Blood Units in inventory for Autologous. : 10305

4. How many cord blood units do you plan to store for public use (unrelated patients)?

In 2017:180 In 2018:180

5. Does your Cord Blood Bank list units in BMDW (www.bmdw.org)?

No

6. Is your Cord Blood Bank affiliated with a National Stem Cell Donor Registry? If yes, list the name of the registry.

Yes, please list the name of the registry: ZKRD

- 3. Cord Blood Units in Inventory
- 7. What is your current processing method? Check all that apply.

Plasma and RBC reduced (manual)

8. What year did your Cord Blood Bank start using your current processes?

1999

- 9. If possible, please upload a picture of cord blood units in your inventory for your current practise in use. You can upload a maximum of five pictures per question.
- 10. If possible, please upload a picture of cord blood units in your inventory for volume reduction. You can upload a maximum of five pictures per question.
- 11. If possible, please upload a picture of cord blood units in your inventory for no volume reduction. You can upload a maximum of five pictures per question.
- 12. Total Nucleated Cell Count (x10E7) of your cord blood units stored for Unrelated Patients (Public Use).

Please specify the number of cord blood units per category.

< 125 : 1049 125 - 149 : 163 150 - 199 : 107 200 - 250 : 20 > 250 : 14

4. Accreditations-licenses-certifications

13. FACT-Netcord accreditation

Is your Cord Blood Bank FACT-Netcord accredited?

In process of accreditation

Year of last on-site inspection (FACT):

2017

14. AABB accreditation

Is your Cord Blood Bank AABB accredited?

No

15. Competent Authority/National Health Authority (state-based).

Is your Cord Blood Bank licensed by a (state-based) Competent Authority?

Yes

Does the Competent Authority perform on-site inspections?

Yes, please specify year of the last inspection.

Year of last on-site inspection of your Competent Authority:

2017

Name of the institution Competent Authority:

Paul Ehrlich Institute

Link to the license website of the institution Competent Authority:

www.pei.de

16. Does your National Stem Cell Donor Registry perform on-site inspections?

No

17. Please describe other accreditations, licenses, or certifications of your Cord Blood Bank.

EFI-Accreditation of the HLA Lab

Laboratory certified according to DIN EN ISO 15189:2014

5. Cord Blood Collection

18. What is your current practice for collecting cord blood?

In-utero

19. Current antiseptic. Check all that apply.

Alcohol

20. Collection bag

Double needle

21. Agitation during collection

None

- 6. Conditioning and transport from Collection Centre to Cord Blood Bank.
- 22. Do you use a secondary bag (sealed, plastic bag or similar to avoid any leakage)?

Yes

23. Transport conditions.

Insulating transport container

Passive refrigeration system (gel, blocks)

Electronic temperature probe

Unqualified transporter

Ground transport

24. Specify temperature range for storage and transportation of fresh product.

Defined (above +8°C)

7. Evaluation

25. Pre-processing Evaluation

Please specify your current threshold for accepting a cord blood unit for public use in your cord blood bank.

Net weight in grams (excluding bag and anticoagulant) before processing

60 - 69.99 grams

TNC (10E7) before processing

< 125

Viability CD45 positive cells (%)

NA- not evaluated pre-processing

Viability CD45 positive cells (method)

7AAD

Viability CD34 positive cells (%)

NA- not evaluated pre-processing

Viability CD34 positive cells (method)

7AAD

26. Pre Processing Evaluation

Please mark the criteria that are completed before accepting a cord blood unit for public use in your Cord Blood Bank. Check all that apply.

Medical History

Collection Report

Informed Consent

Maternal IDM results

Temperature and integrity of the bag

27. Which method is used for CD34 enumeration?

ISHAGE guidelines

28. Do you use external proficiency testing for QC of your FACS lab?

Yes, please specify (e.g. UKNEQAS): UNSTAND

29. Does your Cord Blood Bank perform post processing/pre-freeze CD34 cell count?

Yes

30. Acceptable time from collection to processing.

24-48H

8. Processing-Packaging

31. Please select the pre freeze processing methods you have used at any stage in time. Check all that apply.

RBC/plasma reduction with HES

32. What are your current pre-freeze processing methods? Check all that apply.

RBC/plasma reduction with HES

33. Please specify additives currently in use in addition to anticoagulants and DMSO during processing. Check all that apply.

HES

34. Please specify cryoprotectant additives currently in use. Check all that apply.

DMSC

35. Please specify cryopreservation method currently in use. Check all that apply.

Programmed freezer

36. Please specify cryobag currently in use. Check all that apply.

Multiple bags

37. What packaging is currently used when a unit is stored? Check all that apply.

Metal canister

38. How many segments do you currently store with the unit? Check all that apply.

Two or more attached segments

9. Testing

39. Using the list below, indicate which Infectious Disease Marker (IDM) testing of the maternal donor and/or cord blood is CURRENTLY performed by your Cord Blood Bank.

| | Standard on Maternal Sample | Standard on cord blood sample | Testing available by request on maternal sample | Testing available by request on cord blood sample | Not done |
|------------------------------------|-----------------------------------|-------------------------------|---|---|-------------|
| Hepatitis B Surface Antigen | X | | | | |
| Hepatitis B core Antibody | X | | | | |
| Hepatitis B Surface Antibody | | | | | Х |
| HBV NAT | X | | | | |
| Hepatitis C Antibody | Х | | | | |
| HCV NAT | X | | | | |
| HIV 1/2 Antibody | | | | | |
| HIV 1 and 2 + 0 Antibodies | X | | | | |
| HIV p24 Antigen | X | | | | |
| HIV NAT Antigen | X | | | | |
| HTLV I/II Antibodies | X | | | | |
| HTLV NAT | | | | | Х |
| CMV Antibody - IgG | Х | | | | |
| CMV Antibody - IgM | X | | | | |
| CMV Anitbody Total | | | | | Х |

| Syphilis | X | | |
|---|---|--|---|
| West Nile Virus NAT | | | Χ |
| West Nile Virus Antibody | | | Χ |
| T. Cruzi Antibody (Chagas Disease) | | | Х |
| EBV Antibody - IgG | | | Χ |
| EBV Antibody - IgM | | | Χ |
| EBV Antibody Total | | | Χ |
| Toxoplasmosis Antibody - IgG | | | X |
| Toxoplasmosis Antibody - IgM | | | X |
| Toxoplasmosis Antibody Total | | | Χ |

40. Does your Cord Blood Bank currently store extra material?

Plasma/cord blood

Maternal plasma/serum

41. HLA typing at time of listing.

| | Low Resolution | Intermediate Resolution | High Resolution | Not performed |
|----------|----------------|-------------------------|-----------------|---------------|
| HLA-A | | | X | |
| HLA-B | | | X | |
| HLA-C | | | X | |
| HLA-DRB1 | | | X | |
| HLA-DQB1 | | | X | |
| HLA-DPB1 | | | | X |

42. Current threshold for accepting a cord blood unit for public use (post processing)

| | Please specify threshold | Please provide method | Not performed |
|--|-----------------------------------|---|---------------|
| Minimum TNC (10E7) | 50 | flow cytometry / BD Trucount | |
| Minimum CD34 (10E6) single platform | 1 | flow cytometry / BD Trucount | |
| Minimum CD34 (10E6) double platform | | | |
| Total-CFU (10E5) | detected | Methocult Medium [GF H84444 StemCell Technologies] | |
| Viability (10E5) | cd 45+ > 90%, CD34+CD45* > 95% | flow cytometry / BD Trucount 7 AAD | |

43. What type of storage container is currently used in your cord blood bank?

Conventional storage tank-Vapor phase

44. What type of storage monitoring is currently used in your cord blood bank?

Centralized system-local

Centralized system-remote monitoring

LN2 level

Temperature monitoring

11. Verification/Extended HLA Typing

45. Is extended/verification typing performed at an ASHI, EFI or CAP accredited lab?

EFI accredited lab

46. What is the average turnaround time for extended HLA typing results?

10 Days or more

12. Confirmatory/verification typing.

47. Does your Cord Blood Bank use an attached (contiguous) segment (if available) for confirmatory/verification HLA typing currently?

Yes

48. Does your Cord Blood Bank list cord blood units that do NOT have attached segments and have NOT previously been confirmatory typed on attached segments?

No

- 49. What is the percentage of cord blood units in your inventory that will be sent with attached segment? 50-75%
- 50. Is your current practice to perform confirmatory/verification typing on all cord blood units prior to release?

Yes

13. Reservation/cancellation policies

51. At what point is a cord blood unit reserved for a patient and not available for other patients? Check all that apply.

At time of reservation request

At time of shipment request

52. What is the length of time a cord blood unit can be reserved?

Other, please describe: until we are informaed that the reservation of a unit is ended / in case of a request for an already reserved unit arrives we contact the TC which made the first reservation wether can be made available

53. Is there a fee to reserve a cord blood unit?

No

54. Is there a fee to cancel the reservation for a cord blood unit in the absence of a subsequent request for shipment?

No

55. Do you allow for an extension on a reservation of a cord blood unit?

Yes

56. Will your Cord Blood Bank provide a cord blood unit report on a cord blood unit that is already reserved for another patient (and thus not available) without specifying that the cord blood unit is already reserved?

No

57. If your Cord Blood Bank releases a cord blood unit from a patient's search (as opposed to the transplant centre indicating that the cord blood unit may be released), do you inform the transplant centre of the release?

Yes

58. Using the list below, please indicate which tests are currently performed by your Cord Blood Bank on a thawed attached segment and at which stage.

| | TNC count | Total viable CD34 count | % viability of CD34 | % viability of CD45 | CFUs |
|--|-----------|----------------------------|---------------------|---------------------|------|
| As standard when verification typing is performed | | | | | |
| As standard when CBU is reserved | | | | | |
| Upon request when CBU is reserved | | | | | |
| Upon request when verification typing is performed | Χ | X | X | X | |
| Only once shipment is requested | | | | | |
| Not performed | | | | | |
| | | | | | |

14. Release-Shipment

59. Does your Cord Blood Bank perform hemoglobinopathy screening before release?

Yes

60. Criteria to allow a Cord Blood Unit to be shipped to transplant centres. See Appendix V of FACT Netcord Standards 6th Edition.

| | Acceptable range of values | Please provide method | Please provide additional information |
|-------------------------|--------------------------------|------------------------------------|---------------------------------------|
| Viability / cell count: | CD45+ >80%; CD34+CD45+ >90% | Flow cytometry BD TRucount 7AAD | |

61. Criteria to allow a cord blood unit to be shipped to transplant centres. See Appendix V of FACT Netcord Standards 6th Edition.

What do you perform at the time a cord blood unit is released to be shipped to a transplant centre? Check all that apply.

Other, please describe: Complete list of Appendix V of FACT Netcord Standards 6th Edition.

62. Current packaging for shipment to transplant centre.

Metal Canister

Transport rack

63. How many segments do you currently send with the unit?

Two or more attached segments

64. How much time is required from the date the shipment order is placed until the unit is shipped?

Less than one week

65. Is there a fee for cancellation of shipment?

No

66. Does your Cord Blood Bank validate its dry shippers to ensure they maintain the temperature at ≤ - 150 °C at least 48 hours beyond the expected arrival time at the receiving facility?

Yes

67. Do all dry shippers used by your Cord Blood Bank contain an electronic temperature data logger?

Yes

68. Who typically chooses the courier company for international transports?

Cord Blood Bank or sending registry

69. Please specify the shape of the transport container you currently use.

Cubic

15. Adverse Events Reporting

70. Adverse Event Reporting

Competent authority Internal report National registry Transplant centre