Convalescent Plasma

Education and administration implications

Julie C. Martin, DNP, AOCN®, FNP-BC

The SARS-CoV-2 virus was first noted in December 2019 with an outbreak in China. The disease caused by the virus, COVID-19, quickly went from being a Public Health Emergency of International Concern to a pandemic, as declared by the World Health Organization on March 11, 2020 (Lango, 2020). With more than 20 million cases in the United States and about 85 million cases worldwide as of this writing (Centers for Disease Control and Prevention, 2021), nurses across specialties are caring for infected patients and are often the primary patient educators about convalescent plasma treatment. Keeping abreast of current clinical guidelines and evidence-based practice allows nurses to identify patients who should be considered for treatment, understand the administration guidelines, and be aware of the toxicity profile to provide safe and high-quality care to patients. The purpose of this article is to provide information on convalescent plasma as a treatment for COVID-19.

AT A GLANCE

■ Nurses can assist with early identification of patients who may be candidates to receive convalescent plasma.

■ Convalescent plasma is not standard fresh frozen plasma; ABO typing is required, and nurses need to follow administration guidelines when the product is given.

■ Nurses must review and provide to patients and caregivers the U.S. Food and Drug Administration’s fact sheet on convalescent plasma, as well as serve as a patient education resource.

KEYWORDS
convalescent plasma; COVID-19; pandemic; passive immunization; antibodies

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