MISTRANSFUSION Risk Reduction for Manitoba

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College of American Pathology (CAP) Accreditation

• Canadian Blood Services and Diagnostic Services Manitoba are both CAP accredited.
• The CAP requirements are updated every two years.
• In July 2015 a new requirement was added.
• Neither CBS or DSM will be compliant.
TRM.30575
“The facility has a system to reduce the risk of mistransfusion for non-emergent red cell transfusions.”
How can CBS & DSM meet this CAP Accreditation requirement?
Possible Solutions

• Verifying the ABO group of the intended recipient on a second sample collected by a second phlebotomy

  or

• Utilizing a mechanical barrier system or electronic identification verification system.
Chosen Solution

Verifying the ABO with a second sample collected by a second phlebotomy
WHY?

• Mechanical and Electronic systems too expensive and require a longer time to implement.

• Only needed for new Group A, B and AB patients with no historical blood group record.

• 360,000 historical patient blood groups are in Traceline®
  – (24 %) of the Manitoba population based on 2014 census

• Investigations determined a second sample will be required for 5% to 7% of patients.
New Process

1. Collect sample
2. Accession sample
3. Perform ABO/Rh & antibody screen
4. Request for 2-4 units
5. Lab checks for previous ABO in Trace Line

- YES: Lab issues group specific blood, Normal process
- NO: Lab issues Group O, Rh + or - as required

Note: After request for 2-4 units, lab will request a second sample.
Clinical Impact

• Neonates will not be affected

• Current practice is to give Group O units that are close to expiration to other blood groups

• Invisible process to clinical units – process will be blood bank driven
Stakeholder Consultations

PMLC
Transfusion Medicine Physicians
Provincial TPC
Acute Care Council
Transfusion Practice Committees
HSC, St. Boniface, WRHA,
Northern, Interlake,
Southern
IMPLEMENTATION DATE

April 4, 2016
ACTION

1. Forward this powerpoint to all Program Directors in January.

2. Request Program Directors to notify and educate all staff prior to April 1, 2016.
CAP Inspection Window
May 1 to July 31 2016
Questions?

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