

## Manitoba's Transfusion Stewardship Project – aligning clinical practice with evidence

This is a collaborative approach between Shared Health, Best Blood Manitoba and Choosing Wisely Manitoba. The initial project will be to align clinical practice of ordering red blood cell transfusions with contemporary evidence. The recommended interventions are 1) restrictive transfusion practice and 2) transfusion of one unit at a time. The patient population to which this applies is primarily admitted patients who do not have concerning signs and symptoms of active bleeding. The restrictive strategy would be inappropriate to apply to outpatient transfusions and to those that are presenting with clinically significant active bleeding.

The project's scope is provincial and is being implemented step wise with the Southern Health-Santé Sud region being the first to go live in January 2020, followed by Prairie Mountain Health in early March.

**Coming soon to a hospital near you!**

### TRANSFUSE SAFELY



Red Blood Cell transfusion is indicated for the treatment of symptomatic anemia. For non-bleeding hospitalized adult patients, single unit transfusion is recommended.

#### STOP

If most recent Hgb is 81g/L or greater, approval by Transfusion Medicine physician on-call is required.

#### EVALUATE

If most recent Hgb is 71-80g/L, and patient is symptomatic transfuse one unit of red blood cells.

#### GO

If most recent Hgb is 70g/L or less, transfuse one unit of red blood cells.

**For resources and more information about the Transfusion Stewardship Project, visit [bestbloodmanitoba.ca](http://bestbloodmanitoba.ca).**

## Red Cell Aliquots – Small Volumes for Small Bodies

Canadian Blood Services (CBS) has introduced red cell transfusions in divided doses to allow customized volumes for neonatal patients. CBS will prepare multiple divided doses from each adult bag when batch orders are received. It's possible to create up to four neonatal doses from each adult bag.



While over-transfusion in neonates is extremely rare, divided doses will further optimize transfusion practice in this high risk group.

## Prevent Wrong Blood in Tube (WBIT)!

The risk of a hemolytic reaction (severe injury or death) from an incompatible blood transfusion can be reduced.

### Always follow these steps when collecting blood samples:

1. Confirm consent has been obtained.
2. Confirm there is an order for a type & screen.
3. Confirm patient ID. **No band? No blood.**
4. Draw blood then hand write on the label affixed to the blood tube **at the bedside.**
5. Label using the patient demographic page and ask the patient for their birthdate if they're able to provide it.
6. Complete requisition and send both to the Blood Bank.

**Human error continues to be a major contributing factor in transfusion associated morbidity.**