

LoPAG

Platelet Champions Newsletter

Edition 4 – Winter 2014/2015



Dear Platelet Champion,

Hello and welcome to the LoPAG Newsletter Edition 4. For this newsletter we are focusing on Top Tip 4 “swapping long-dated platelets for short-dated ones”. This is one of those things that everybody thinks they do but it sometimes falls off the radar of reviewing what is issued to which patient, and whether we can swap platelets over rather than re-issuing the ones already allocated. It falls under the heading of “good stock control” which we know competes for our attention along with everything else. However a few minutes during the day going through the platelets issued and ones in stock, and if possible swapping them over (particularly if we know they are going to be used) could help reduce platelet wastage. Even a few bags over several different laboratories can make an impact.

In other news, thank you for everyone who took part in our Double-Dose Platelet Audit. The results were presented at the RTC and we will be sending them out to the Platelet Champions very soon.

Rachel Moss – Chair of LoPAG

Sept 2014 - Platelet Issues

National Platelet Issues - 22452

Regional Platelet Issues – 6094

Oct 2014 - Platelet Issues

National Platelet Issues - 23162

Regional Platelet Issues - 6289

Nov 2014 - Platelet issues

National Platelet Issues - 22035

Regional Platelet Issues - 6009

Dec 2014 – Platelet Issues

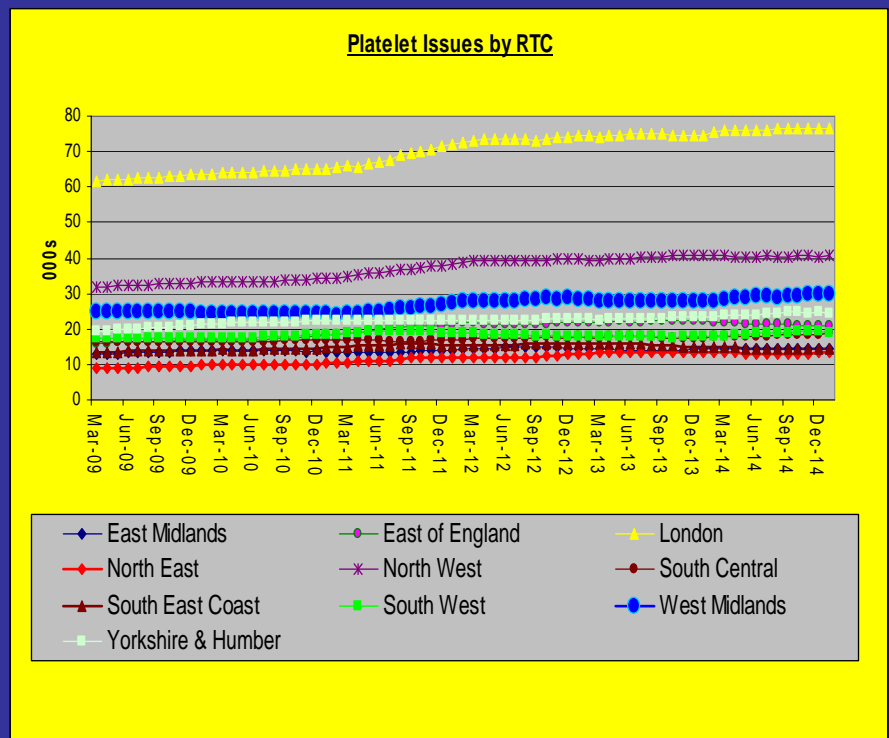
National Platelet Issues - 23844

Regional Platelet Issues – 6649

Jan 2015 – Platelet Issues

National Platelet Issues – 23131

Regional Platelet Issues – 6606



As you can see from the graph above, The London RTC region has more platelets issued to its hospitals than any other RTC region.

Where does your hospital fit in?

National Platelet Resources available at: <http://hospital.blood.co.uk/>

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Top Tips to reduce platelet usage and wastage NUMBER 4

Consider swapping long dated platelets for short dated ones.

If you know a patient is going to be transfused, give them the shortest dated platelets.

Case study – LoPag Top Tip Number 4 - “Consider swapping long dated platelets for shorter ones”
Platelet inventory management at the Royal Free London.

In 2013 the role of platelet coordinator was introduced at the Royal Free Hospital. An audit of platelet use highlighted areas of poor clinical practice with respect to transfusion thresholds and a high number of double dose requests/transfusions. In addition, the platelet coordinator identified problem areas in the laboratory with regard taking and handling platelet requests. Stock management was highlighted as a key area with scope for improvement.

In the laboratory, all BMS staff were trained and encouraged to ask appropriate questions when handling requests for platelet products to allow assessment of appropriateness. Basic information is obtained from the requesting clinician regarding the platelet count, reason for thrombocytopenia, patients’ diagnosis, reason for transfusion and target platelet count where appropriate. Any requests outside guidelines are referred to the platelet coordinator or the haematology SpR/Consultant for discussion. All platelet requests for patients under the care of haematology are reviewed by the platelet coordinator, who attends clinical rounds and interacts with the clinicians to be aware of the current treatment plan and the patients’ current clinical issues.

Based on this information the platelet coordinator and laboratory staff can ensure appropriate units are issued to patients.

The units currently ‘in stock’ are updated on a whiteboard in the laboratory, and this and the blood track system are checked regularly to ensure that any units issued but not collected can be returned to stock and reallocated with sufficient time to be transfused to another recipient. Restocking and reallocating units that have been issued but not transfused to a patient is time consuming. With careful analysis of platelet transfusion needs we aim to issue the most appropriate units, but even with the best planning, requirements can change rapidly. Unexpected admissions, cancelled procedures and patients with bleeding complications are just a few of the issues that may impact platelet demand significantly.

It is very much a case of applying common sense but in a busy laboratory adjustment of the inventory or reallocation of products to the patient most likely to use the product first may be overlooked. With more information to hand the BMS responsible for platelet issues can make an assessment of the urgency of request and issue the most appropriate product available. For example, if the unit is likely to be collected immediately, they will be issued the shortest dated unit available that is suitable for that patient. If platelets are required on standby to cover a procedure, we would normally select a unit with a longer expiry, to ensure that if it is not used by the agreed de-reservation time then it can be reallocated and used by another patient. With these processes in place it is much easier to make adjustments or swap units around if circumstances for one particular patient change.

This is one of many processes related to platelet transfusions that have been reengineered over the last 1.5 years at the Royal Free London. As a result of the improvements made we have seen significant reduction in wastage of platelet products.

Wastage as a percentage of platelets issued (WAPI) has fallen over 70% for the year 2014-15 when compared to 2013-14.

Your Case Studies

Next Issue (Summer 2015) – “Top Tip Number 5 – Consider using different ABO group platelets in adults who are bleeding.”

Although when used prophylactically ABO matched platelets survive longer, in the bleeding patient a different ABO group will be just as effective at stopping the bleeding.

Has this process been successfully used in your hospital? If so get in touch and we’ll include your case study in the next edition of the newsletter.

Upcoming meetings

Joint meeting of BBTS in conjunction with BSH

“Spotlight on Platelets”

11th November 2015, Birmingham Motorcycle Museum

Come and help shape opinion on best practice for Platelet Transfusion

Full details regarding cost and registration will follow (www.bbts.org.uk)

Please send feedback and comments to Amanpreet.Dhesi@nhsbt.nhs.uk