

Blood Conservation - starting from scratch

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Introduction

- Overview of current situation
- Initial actions
- Service review
- Challenges and limitations
- Developments
- Next steps

Anaemia

Where to start?

Orthopaedics..... Surgical patients

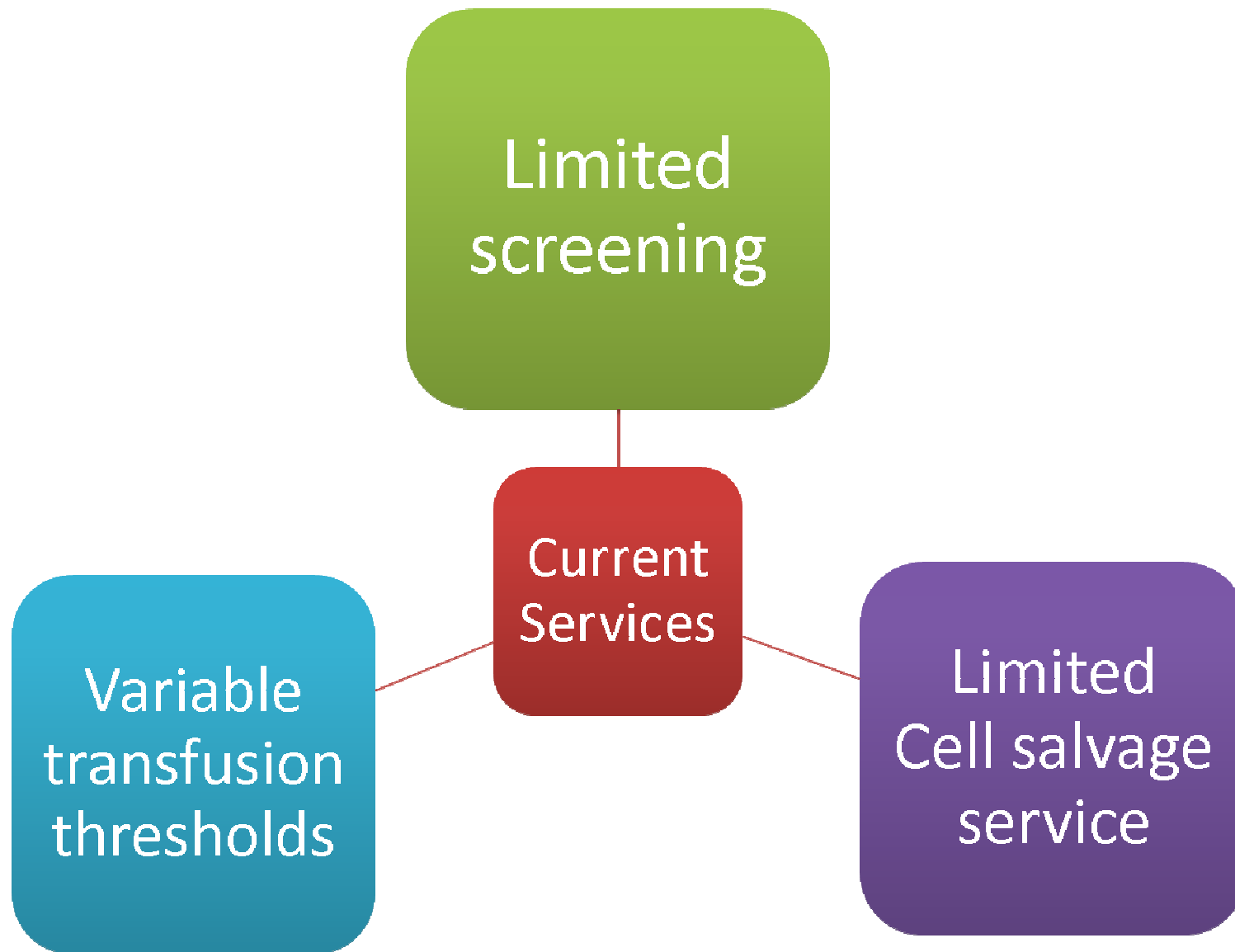
Average
across UK

30%

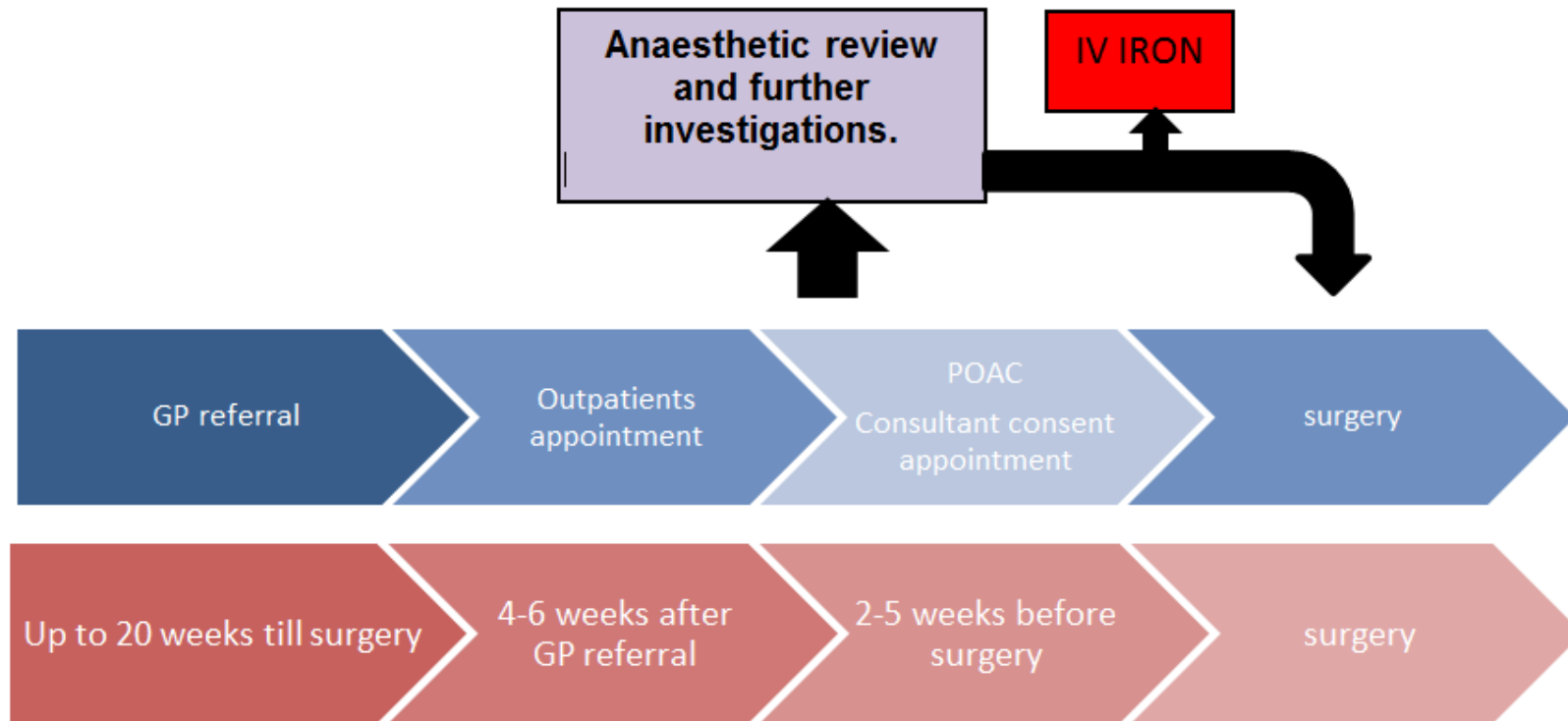
NBT

40%

- 7 days LOS with Hb >120g/L.
- 15 days LOS with Hb <120g/L
- 19 days LOS post transfusion.



Preoperative flow prior to changes



Initial actions



Funding for a Blood Conservation Coordinator

BCC set up Patient Blood Management Group

Begin monitoring and recording

Conduct initial service review

Service feedback from all areas

GP feedback

Conduct services review

Services review

Outpatients:

- Screening

**Pre operative
assessment:**

- Screening
- IV iron

Intra operative:

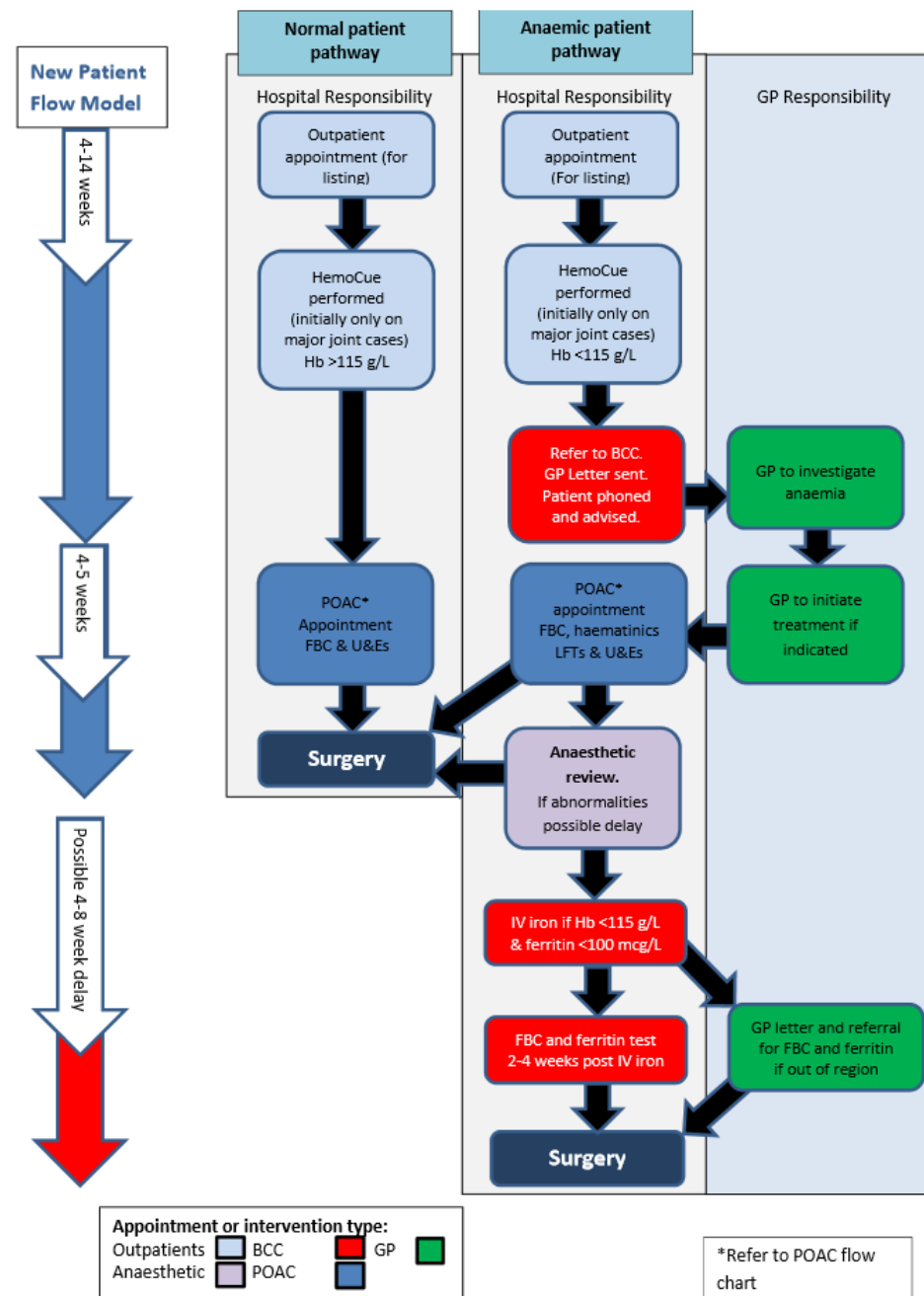
- Cell salvage
- Major haemorrhage guidelines
- Maximum Blood ordering schedule
- Tranexamic acid
- Rotem usage
- Surgical technique

Post operative:

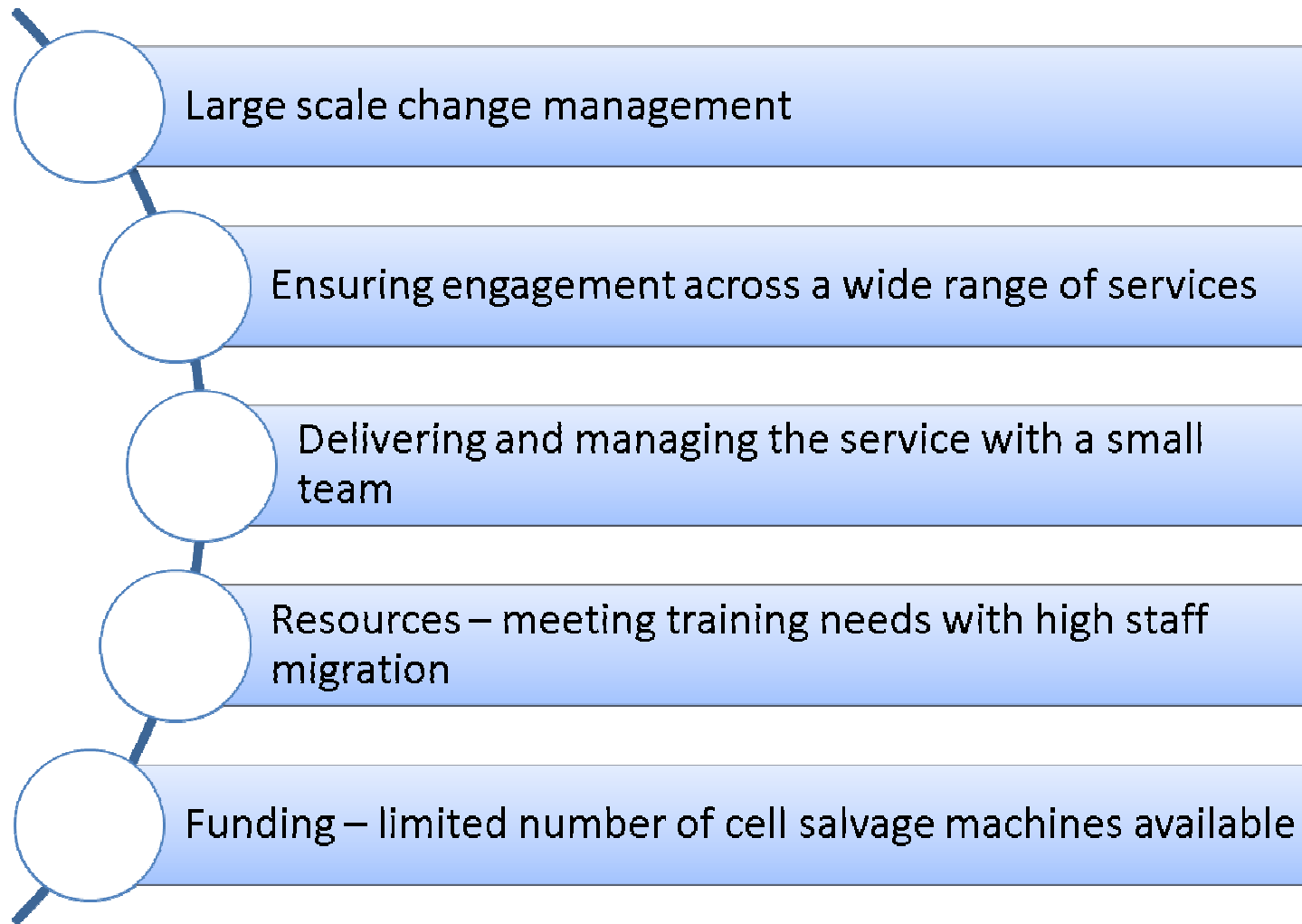
- Transfusion triggers and guidelines
- Iron treatments

Obstetric:

- IV iron pre and post
- Major haemorrhage



Challenges and Limitations



Progress

Support

- Big drive for cell salvage training
- Re-written paperwork:
 - leaflets, flyers and SOPs
- Reviewed guidelines:
 - Major haemorrhage
 - Post-partum haemorrhage
 - MSBOS
 - Transfusion trigger
 - Operations suitable for cell salvage

Actions

- Tripled cell salvage service
- Increased ROTEM usage
- Engaged stakeholders in all disciplines across the Trust
- Database to track patients and measure success
- Created 'Patient Blood Management Action Group' for the Trust

Intervention

- Screening patients in outpatients with GP referrals
- IV iron administration
- Greater use of tranexamic acid especially in obstetrics

Early successes

All patients benefit
from interventions

Improved Hb's prior
to surgery

Reduced transfusion
rate, targeted
product usage

Reduced
cancellations due to
anaemia

Better SOPs,
protocols,
guidelines resulting
in improved practice

Cell salvage
'champions'

Future developments

Make current service more robust

- Screen all outpatients (not just major joint)
- Further reviews in obstetrics
- Invest in more equipment
- Further post operative work

Extend service to medical patients

Working together with GPs to reduce anaemia rate at Regional level

Monitor, record and extrapolate data