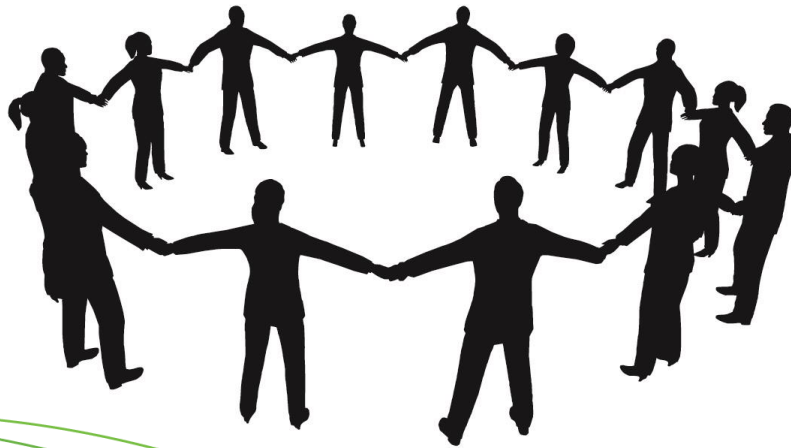


# Pre-Assessment & Pre-Surgical Preparation: Effective Multi-Disciplinary Working for Elective Patients



People feel **cared** for,  
**safe** and confident  
we are **making a**  
**difference.**

**Sister Trudy Parfrey**

Pre-surgical preparation manager  
QEQM Margate



# How do we achieve success?

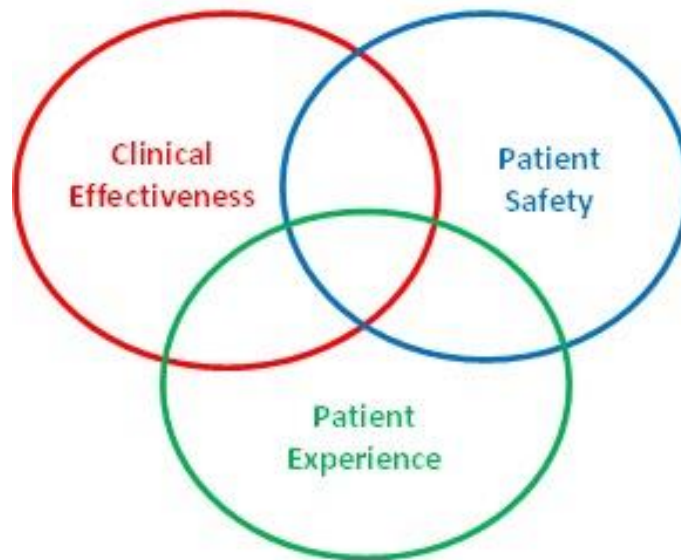
- **Collaborative Working**
- **Improvements**
  - Past
  - Present
  - Future
- **Education**
- **Learning**
  - Challenges
  - Celebrations



# Collaborative working

- **Who?** Pre-assessment and Pre-surgical Preparation working in Partnership with Transfusion
- **Why?**

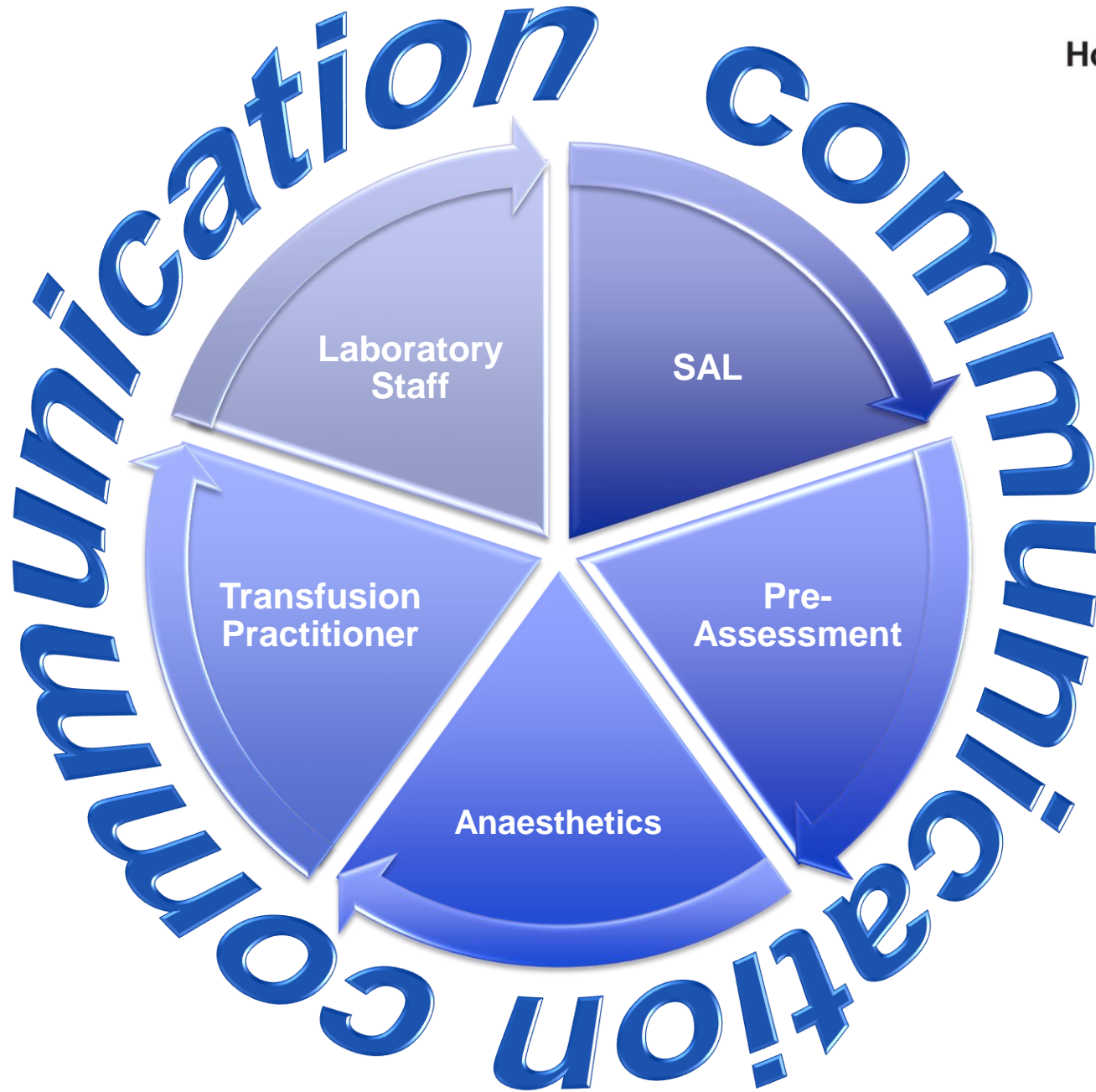
## The Key to Quality



# Collaborative working

- ☐ **Pre-operative Group and Save Samples** are taken as per local policy and NICE Guidance and Standard Blood Ordering Schedule.
- ☐ Safe & Appropriate Transfusions – **Right Blood, Right Patient, Right Time**
- ☐ Blood/blood products are available for **agreed surgery date and time**
- ☐ Mandatory training & competency requirements





# Communication Tools



# Communication Tools

## Patient Care Pathway

SpO <sub>2</sub> on air	%	Temp.	°C	Peak Flow	l/min	BMI:
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		YES	NO			YES	NO
Blood Tests Ordered (Please refer to NICE Guidelines)	FBC			Clotting Screen			
	Elec. & Creat. U&E			IFCC			
	Group & Save - 1st sample taken			Other.....			
	- 2nd form given			Other.....			

If Group & Save sample taken / form given; Please complete Group & Save box on Page 10

Investigations:	Tick here if done	Result (if applicable)	Tick here if ordered
Tests: (If abnormal please			

Pre-Assessment





# Communication Tools

## Patient Care Pathway

2nd Group & Save form given to patient at pre-assessment YES / NO Initial and Date: .....	
Date Sample to be taken: ____ / ____ / ____	(This grey section to be completed by Pre-assessment staff)
On admission, confirmed that sample taken on above date YES / NO Initial and Date: .....	
If sample not taken please ensure sample taken on admission if indicated	

Name of Nurse ..... Signature .....

**SAL &  
Pre-Assessment**

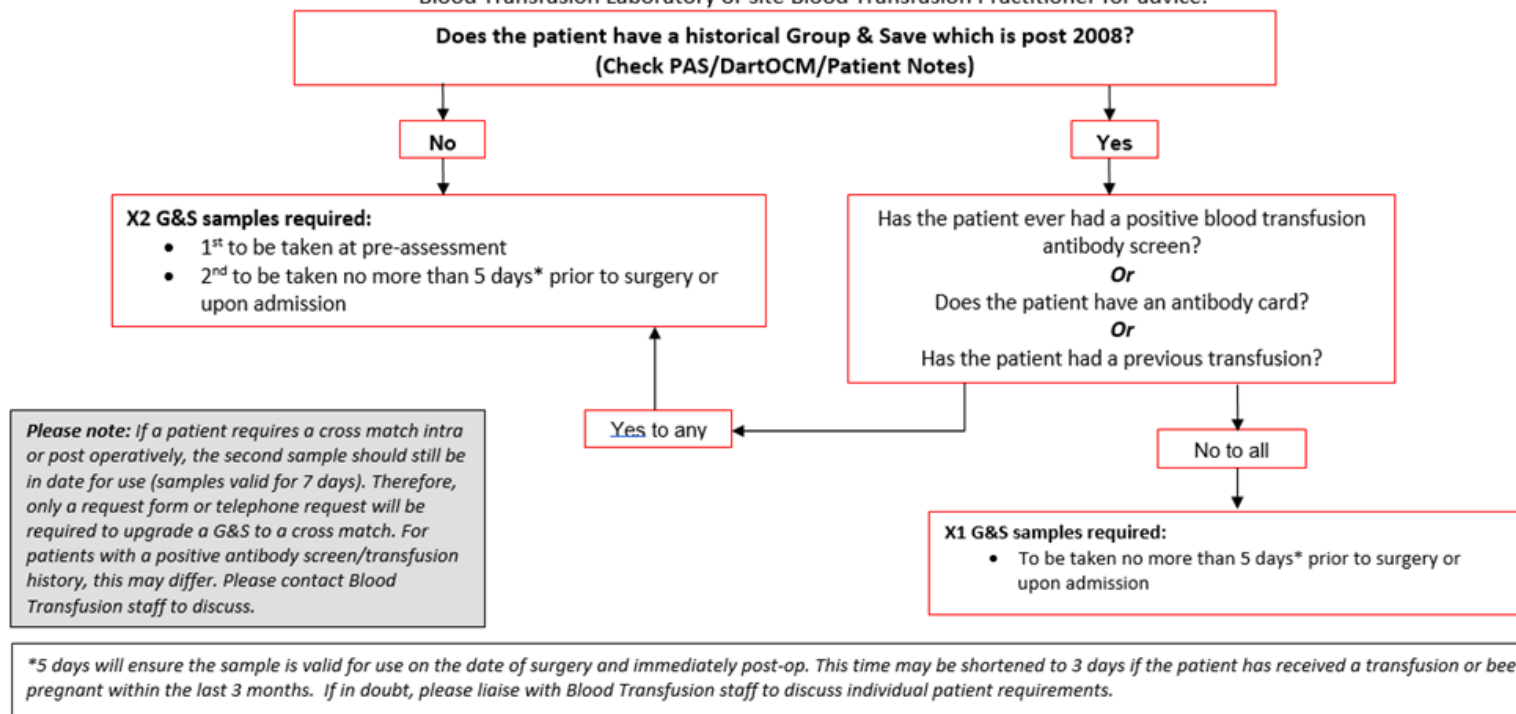




# Communication Tools

## Flow Chart for Determining if a Patient requires One or Two Pre-Operative Blood Transfusion Samples

This flow chart is designed for guidance only. At pre-assessment, the type of surgery along with the [patients](#) overall condition and any relevant medical history must also be considered. Please use the flow chart in conjunction with the EKHUFT MSBOS and NICE guidelines. If you are in any doubt, please contact your Blood Transfusion Laboratory or site Blood Transfusion Practitioner for advice.



**QEOM:** Blood Transfusion Laboratory 725-4429 Transfusion Practitioner Ext 725-5118/Mob 07795834213

**KCH:** Blood Transfusion Laboratory 722-5064, 722-2719 Transfusion Practitioner Ext 722-8759/Mob 07833400475

**WHH:** Blood Transfusion Laboratory 723-6017, 723-6814 Transfusion Practitioner Ext 723-6607/Mob 07813458967

# Improvements

Past



# Improvements

## Present



# Improvements

Future



# Improvements

## Education

- Study Days
- Team Meetings
- Mandatory Training

## Sustaining Communication



# Learning

- Challenges
- Celebrations





# Learning

This is the story of Betty's experience

Betty was due for a laparoscopic cholecystectomy. The surgery was a high risk of conversion to open. Betty's surgery was cancelled as she had unusual antibodies

1

Betty was pre-assessed and stated she had a positive antibody. However due to her surgery not usually requiring a group and save, no blood was taken for testing.

2

**Learning** - any patients that have a history of a positive antibody or carry an antibody card - The pre op staff must discuss with the transfusion lab for potential transfusion management.

4

Surgery cancelled due to high risk of bleeding and unusual positive antibody. Coordination required with the national blood transfusion service in Liverpool.

3

# Learning

This is the story of Peter's experience

Peter was pre-assessed at Kent and Canterbury Hospital for a procedure at QEQM. Peter had known positive antibodies and carried a card.

1

Bloods were taken for group and save. Pre-assessment nurse contacted SAL at QEQM to inform that the Peter had positive antibodies.

2

**Peter's surgery went ahead successfully!**

4

3

A copy of the patients positive antibody card was emailed to the SAL at QEQM.

# Summary

- **Collaborative Working**
- **Communication**
- **Education**
- **Learning**

# Questions



# QEQM Pre-assessment Rules

## What has the laboratory put in place :

- Pending clip for all pre-assessment G&S requests for patients with red cell antibodies.
- Write in diary to order selected red cells to be delivered to be cross-matched prior to surgery.
- Notice to '**Check for patients with red cells antibodies**' on box where G&S request forms are filed - and to put forms on pre-assessment pending clip.
- Cross-match selected red cells for ALL patients to cover operation

