

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.

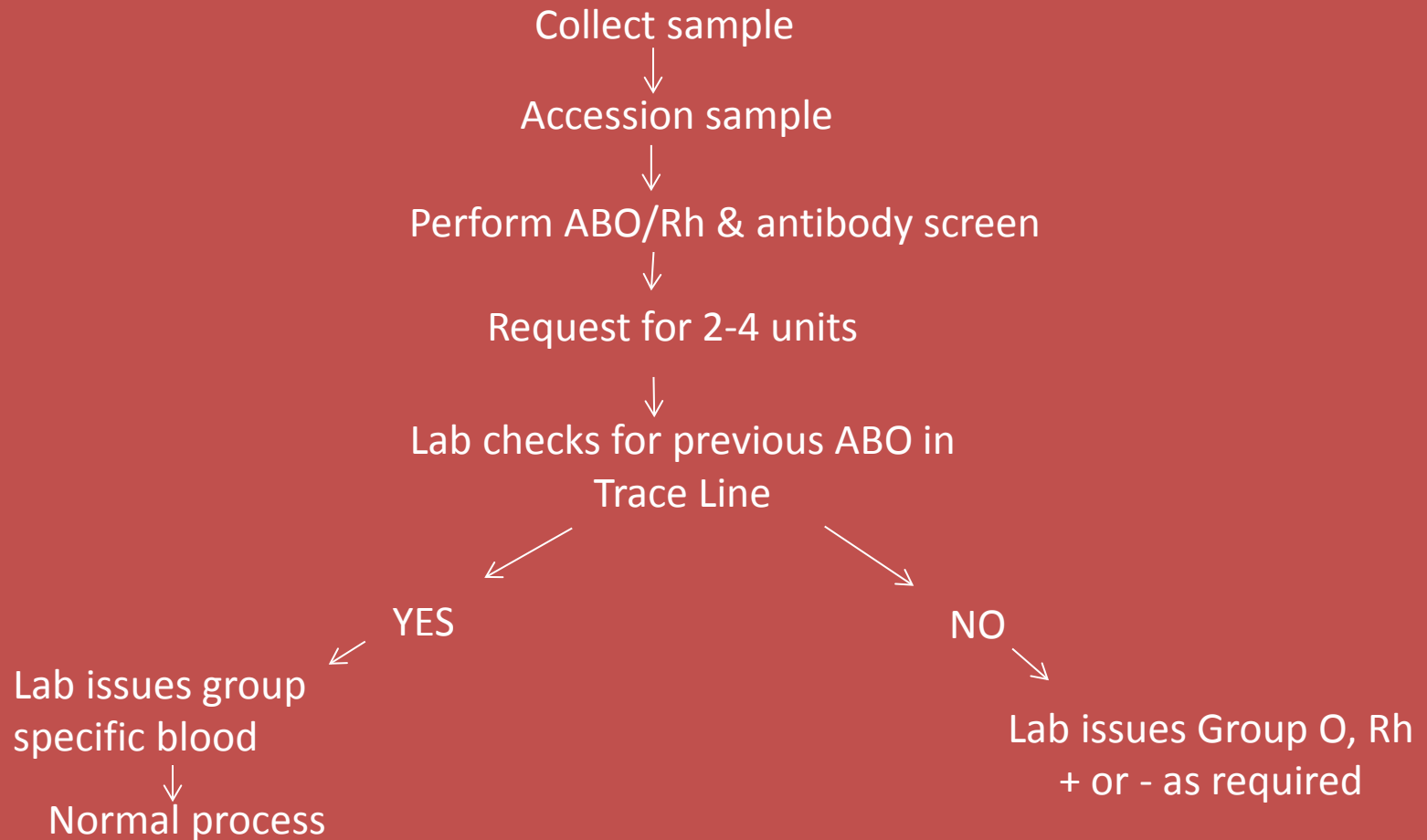
Chosen Solution

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



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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