

MEMO

Date: September 29, 2023

To: Physicians, RHA CMO's, CNO's & CEO's

- From: Dr. Charles Musuka, Medical Director Transfusion Medicine, Shared Health Diagnostic Services
- **Cc:** Dr. Amin Kabani, Medical Lead, Shared Health Diagnostic Services Dr. Abdi Sokoro, COO, Shared Health Diagnostic Services

RE: National Blood Shortage

Since the middle of June 2023, Canada has been experiencing challenges with its blood supply. Historically, CBS has maintained a minimum inventory of five (5) days on hand (a measurement of how many days it takes to deplete current inventory) to accommodate demand across the country. Because of the inventory challenges, hospitals were encouraged to reduce their blood inventories. All Manitoba hospital blood banks have complied with this request. Despite multiple donor appeals; the blood supply situation has not improved, instead it has steadily deteriorated. At the opening of business on September 26th 2023, CBS had blood group O positive inventory of 1.9 days on hand.

If the situation does not improve; it is likely that there will be order cuts and or shortages of blood in the foreseeable future. In an attempt to prevent us from sliding into a significant blood shortage that affects patient care, you are requested to follow the best practices that are outlined in the <u>Choosing Wisely Canada recommendations related to blood cell transfusions</u>.

- 1. Don't routinely transfuse red blood cells in hemodynamically stable patients with a hemoglobin concentration greater than 70 g/l (a threshold of 80 g/L may be considered for patients undergoing cardiac or orthopedic surgery and those with active cardiovascular disease).
- 2. Don't transfuse more than one red cell unit at a time when transfusion is required in stable, non-bleeding patients.
- 3. Don't transfuse red blood cells for arbitrary hemoglobin or hematocrit thresholds in the absence of symptoms, active coronary disease, heart failure or stroke.

Because of the tenuous blood supply situation and the need to preserve our inventories; the Shared Health Transfusion Medicine Discipline will be screening and auditing requests from all Manitoba hospitals. There may be delays, cancellations and additional need for consultation in situations where insufficient clinical information is provided or where the indications are not within the Choosing Wisely guidelines.

Contact Information:

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URGENT: IMMEDIATE ACTION REQUIRED

To:ALL HOSPITAL SITESFrom:National Emergency Blood Management Committee (NEBMC)*Subject:GREEN PHASE ADVISORY

National Inventory Advisory

Date and time of issue	2023-09-28 3:00pm (EST)
Inventory Availability Phase	Continuation of GREEN PHASE ADVISORY
Product(s)	O red blood cells (Rh positive and negative) and A positive red blood cells
Description	The Green Phase Advisory declared on June 16, 2023, remains in effect for group O red blood cells (Rh positive and negative).
	The Green Phase Advisory has also been extended today to include A positive red blood cells.
	Order delays or cuts may occur for the components under the Green Phase advisory. Hospitals which experience challenges in obtaining orders should inform their Provincial Emergency Blood Management Committees (PEBMCs) and highlight if patient impacts have a significant potential to occur. PEBMCs should in turn be prepared to inform hospitals and provide guidance when possible on where order reductions may be more appropriate should they be unavoidable.
	Prior to the weekend, facilities should have established thresholds that would trigger submitting STAT orders to maintain clinical services and only stock up to Green Phase Advisory levels to support the availability of product for other parts of the blood system.
Impact on hospitals	 Action Required: Until Canadian Blood Services' inventories for group O RBCs recover more completely, it is recommended that hospitals continue to follow best practice for appropriate use. For O-negative RBCs, the NEBMC recommends the best practices outlined in the National Advisory Committee on Blood and Blood Products statement for the: <u>Utilization and inventory management of Group O RH(D)-negative red cells.</u> Additionally, the NEBMC recommends the following best practices for all red blood cell
	 groups, including adherence to patient blood management principles outlined in: <u>Choosing Wisely Canada recommendations related to red blood cell transfusions</u> The NEBMC also recommends the following: All blood system stakeholders should continue to actively monitor inventories and work within their respective PEBMCs to decrease inventories where appropriate to mitigate the risk of further order cuts (where needed across the country).

	• PEBMCs should be prepared to provide guidance to the NEBMC on hospitals in their jurisdiction where order delays or reductions may be better tolerated than others.
	 Hospitals should continue to provide inventory levels for group O red blood cells (RBCs) by 12:00 noon EST each day. In the absence of reporting during these inventory challenges, cuts to inventory requests may be made inequitably. Hospital inventory is to be reported via the following link: https://myhospital.blood.ca/, or in accordance with usual provincial practices (British Columbia and Manitoba).
	 Hospitals should confirm their ability to accommodate Héma-Québec components as well as make any process or system updates required to accommodate Héma-Québec components, should they be provided.
	Shipment Index The NEBMC recommends the Shipment Index for group O RBCs be reduced to 15 for O- negative and 10 for O-positive. These targets apply to provinces only (excludes territories) and will be used by PEBMCs to determine how hospital inventory will be allocated in their jurisdictions, to avoid indiscriminate inventory cuts.
	It is recognized that not all hospitals within a province will be able to reduce inventories due to local circumstances such as size, proximity, programs, and previous action taken to reduce inventory but confirmation with the PEBMC of these plans is recommended.
	If a hospital is not aware of what steps to take, they are asked to connect with their PEBMC, their Hospital Emergency Blood Management Committee or their Hospital Liaison Specialist. These targets are not expected to impact the provision of blood for clinical care, but should such instances occur they are to be reported to the PEBMC to bring to the NEBMC's attention.
For more information	 For additional info, contact: 1. Your representative to the Provincial Emergency Blood Management Committee 2. Your representative to your Hospital Emergency Blood Management Committee 3. Your Hospital Liaison Specialist, Canadian Blood Services

*The National Emergency Blood Management Committee is comprised of the National Advisory Committee on Blood and Blood Products, Provincial Territorial Blood Liaison representatives and key Canadian Blood Services personnel. This group will develop recommendations and provide advice to the P/T Ministries of Health, hospitals and regional health authorities, and Canadian Blood Services to support a consistent and coordinated response to critical blood shortages in Canada.

For information about the National Blood Shortages Plan, please see: http://www.nacblood.ca/resources/shortages-plan/index.html

If you require this advisory in an accessible format, please contact your local Canadian Blood Services Hospital Liaison Specialist.