Ensuring a Safe Surgical Experience for the Patient Likely to Require an Intraoperative Blood Transfusion

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Background: Patients undergoing specific surgical procedures and their treating physicians need to be assured that blood can be immediately available for transfusion during or after the procedure. Certain antibodies can make obtaining that blood difficult and must be identified through a preoperative screening process prior to the administration of anesthesia for the procedure.

Policy:
A policy was developed to ensure that all patients undergoing a surgical procedure who are at risk for blood loss that may require a transfusion have blood available from the blood bank prior to the administration of anesthesia. The patient will have preoperative screening for antibodies within 30 days prior to that procedure. Screening can be accomplished by Type & Screen (T&S).

Implementation:
- A letter is mailed to the family which should accompany patient to the pre-op physical.
- The letter serves as education on our policy for the family and primary provider.
- PAT nurses verify T&S completion upon initial review of chart and again with the pre-op phone call.
- If T&S not completed prior to day of surgery, surgery will be delayed while lab work is obtained or rescheduled.

Lessons Learned:
- Protocol identified and implemented for PAT nurse to place Type & Screen order when T&S not obtained at outside clinic.
- Education need identified for primary care clinics. Education then provided to clinics on the policy and Gillette’s ability to use a T&S from an outside lab.

Outcomes:
- Gillette has set a new community standard.
- Hard stops utilized when policy not followed.
- No incidents of delay in blood transfusion have been reported.

Why
- Gillette cares for patients with some of the most complex, rare, and traumatic conditions in pediatric medicine.
- Gillette’s patient population is at high risk for developing antibodies due to previous blood transfusions for various conditions.
- Many Gillette patients require high-risk surgeries.
- High-risk surgeries often require blood transfusions.
- Cross-matching can be difficult and time-consuming when patients have antibodies in their blood.

Patient Story:
- Patient presented to pre-op without the required T&S.
- Surgeon did not want to delay surgery so patient proceeded to surgery without T&S results. Risk was identified as low as patient had never had a blood transfusion in the past.
- Lab work revealed patient had antibodies even though patient had no record of previous blood transfusion.
- No blood transfusion required.