



PBM and the role of specialist in blood bank

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Patient blood management (PBM) is defined as an evidence-based, multidisciplinary approach to optimizing the care of patients who might need transfusion. PBM includes all aspects of patient evaluation, transfusion decision-making process, minimization of blood loss, and optimization of patient red cell mass.

The specialist in blood bank needs to assess actual transfusion practice before implementation of any PBM program. The utilization audit including monitoring of pre-transfusion Hb and post-transfusion Hb would be useful to understand the transfusion practice in clinical department.

PBM implementation will vary greatly depending on differences in health care system, such as the health care reimbursement in each country and the cost of blood product. The important constraints to achieving the implementation of PBM program have been known as time and money.

The role of specialist in blood bank is to make a good transfusion culture and enable good transfusion practice in the hospital.

Table 1. Role of the specialist in blood bank for implementation of PBM

Assessment of actual transfusion practice

Utilization audit – review of pre-transfusion Hb and post-transfusion Hb

Survey of top indications for red blood cell use

Steps for launch of PBM program

Getting a support by transfusion committee and medical director
with official directive

Making a multidisciplinary PBM team

Education of faculty and trainee physicians

Presentation of PBM at ward

Use of handouts, laminated cards, posters, checklists; marketing with PBM logo (pens, buttons, shirts, etc)

Use of PBM checklist

Standard Operating Procedures for PBM

Checklist when RBC are requested

Documentation of the indication for RBC transfusion

Preoperative optimization of hemoglobin levels

Assessment of anemic patients (laboratory screening)

Diagnosis of type of anemia (iron-deficiency, vitamin B₁₂ or folic acid deficiency)

Minimization of blood loss

Avoidance of blood wastage for tests and procedures (smaller draw volumes)

Benchmarking



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“transfuse and assess” strategy (Single-unit transfusion)

Participation of development of a national PBM guideline

Communication of priority areas for improvement in transfusion practice
