

Patient Blood Management Certification Revisions

Patient Blood Management (PBM) Certification Program

Assessments: Internal and External (PBAM) Chapter

Standard PBAM.2

Requirement Text:

The program reports on its performance.

PBAM.2

EP: 2

Current EP Text:

Revision Type: Revised

The report shall include the following, at a minimum:

- Overall program effectiveness and opportunities for improvement.
- Allogeneic transfusion rates by service line and/or procedure type.
- Use and efficacy of preoperative anemia management interventions.
- Component usage and discard, and cause(s) of waste.
- Appropriateness of allogeneic transfusion by service line and/or procedure type.
- Adoption of patient blood management techniques.
- Effectiveness of the emergency/massive transfusion processes and appropriateness of activation and timeliness of delivery of blood and components.
- Customer satisfaction (for example, patients, physicians, administrators).
- Compliance with recommendations made by the program.
- Suspected transfusion-associated adverse events and adverse events associated with the failure to transfuse when appropriate.

PBAM.2

EP: 2

New EP Text:

The report shall include the following, as required for the program's activity level:

- Overall program effectiveness and opportunities for improvement.
- Allogeneic transfusion rates by service line and/or procedure type.
- Use and efficacy of preoperative anemia management interventions.
- Component usage and discard, and cause(s) of waste.
- Appropriateness of allogeneic transfusion by service line and/or procedure type.
- Effectiveness of the emergency/massive transfusion processes and protocols.
- Compliance with recommendations made by the program.
- Suspected transfusion-associated adverse events and adverse events associated with the failure to transfuse.
- Program performance goals for next reporting period.

Documents and Records (PBMDR) Chapter

Standard PBMDR.2

Requirement Text:

The program has a process for document control.

PBMDR.2

EP: 1

Current EP Text:

The program shall have a process for document control that includes the following elements: A master list of documents, including policies, processes, procedures, labels, and forms that relate to these PBM standards.

Revision Type: Revised

PBMDR.2

EP: 1

New EP Text:

The program shall have a process for document control that includes the following elements:

- A master list of documents, including policies, processes, procedures, labels, and forms that relate to these PBM standards
- Use of standardized formats for all policies, processes, procedures, and forms. Additional procedures (such as those in an operator's manual) may be incorporated by reference
- Review and approval of new and revised documents before use
- Review of each policy, process, and procedure by an authorized individual at a minimum every 2 years.
- Use of only current and valid documents
- Appropriate and applicable documents shall be available at all locations where activities essential to meeting these PBM standards are performed
- Identification and appropriate archival of obsolete documents
- Storage in a manner that preserves legibility and protects from accidental or unauthorized access, destruction, or modification

PBMDR.2

EP: 2

Current EP Text:

The program shall have a process for document control that includes the following elements: Use of standardized formats for all policies, processes, procedures, and forms. Additional procedures (such as those in an operator's manual) may be incorporated by reference.

Revision Type: Deleted

PBMDR.2

EP: 3

Current EP Text:

The program shall have a process for document control that includes the following elements: Review and approval of new and revised documents before use.

Revision Type: Deleted

PBMDR.2

EP: 4

Current EP Text:

Revision Type: Deleted

The program shall have a process for document control that includes the following elements: Review of each policy, process, and procedure by an authorized individual at a minimum every 2 years.

PBMDR.2

EP: 5

Current EP Text:

Revision Type: Deleted

The program shall have a process for document control that includes the following elements: Use of only current and valid documents.

PBMDR.2

EP: 6

Current EP Text:

Revision Type: Deleted

The program shall have a process for document control that includes the following elements: Appropriate and applicable documents shall be available at all locations where activities essential to meeting these PBM standards are performed.

PBMDR.2

EP: 7

Current EP Text:

Revision Type: Deleted

The program shall have a process for document control that includes the following elements: Identification and appropriate archival of obsolete documents.

PBMDR.2

EP: 8

Current EP Text:

Revision Type: Deleted

The program shall have a process for document control that includes the following elements: Storage in a manner that preserves legibility and protects from accidental or unauthorized access, destruction, or modification.

Standard PBMDR.3

Requirement Text:

The program has a process for record retention.

PBMDR.3

EP: 3

Current EP Text:

Revision Type: Revised

Before the destruction of the original records, the program shall have a process to ensure that copies of records are:

- Verified as containing the original content.
- Legible, complete, and accessible.

PBMDR.3

EP: 3

New EP Text:

Before the destruction of the original records, the program shall have a process to ensure that copies of records are as follows:

- Verified as containing the original content.
- Legible, complete, and accessible.

Standard PBMDR.4

Requirement Text:

The program has a record system.

PBMDR.4

EP: 5

Current EP Text:

Revision Type: Deleted

The program shall include a method for managing patients who are unidentified at the time of presentation and a method to coordinate records once the patient is identified.

PBMDR.4

EP: 6

Current EP Text:

Revision Type: Moved

The record system shall allow the evaluation of outcomes of specific interventions associated with patient blood management, and to investigate adverse events.

PBMDR.4

EP: 5

New EP Text:

The record system shall allow the evaluation of outcomes of specific interventions associated with patient blood management, and to investigate adverse events.

PBMDR.7 **EP: 7**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Evaluation and participation in selection of suppliers of products and patient blood management–related services.

PBMDR.7 **EP: 8**
New EP Text:
 The following records are retained for a minimum of 5 years: Evaluation and participation in selection of suppliers of products and patient blood management–related services.

PBMDR.7 **EP: 8**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Agreements.

PBMDR.7 **EP: 9**
New EP Text:
 The following records are retained for a minimum of 5 years: Agreements.

PBMDR.7 **EP: 9**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Review of agreements.

PBMDR.7 **EP: 10**
New EP Text:
 The following records are retained for a minimum of 5 years: Review of agreements.

PBMDR.7 **EP: 10**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Validation of new or changed processes and procedures.

PBMDR.7 **EP: 11**
New EP Text:
 The following records are retained for a minimum of 5 years: Validation of new or changed processes and procedures.

PBMDR.7 **EP: 11**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Review of patient blood management and utilization practices.

PBMDR.7 **EP: 12**
New EP Text:
 The following records are retained for a minimum of 5 years: Review of patient blood management and utilization practices.

PBMDR.7 **EP: 12**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Patient blood management educational materials.

PBMDR.7 **EP: 13**
New EP Text:
 The following records are retained for a minimum of 5 years: Patient blood management educational materials.

PBMDR.7 **EP: 13**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Review of quality control results for patient blood management–related equipment and methods.

PBMDR.7 **EP: 14**
New EP Text:
 The following records are retained for a minimum of 5 years: Review of quality control results for patient blood management–related equipment and methods.

PBMDR.7 **EP: 14**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Review and approval of new and revised documents before use.

PBMDR.7 **EP: 15**
New EP Text:
 The following records are retained for a minimum of 5 years: Review and approval of new and revised documents before use.

PBMDR.7 **EP: 15**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Biennial review of policies, processes, and procedures.

PBMDR.7 **EP: 16**
New EP Text:
 The following records are retained for a minimum of 5 years: Biennial review of policies, processes, and procedures.

PBMDR.7 **EP: 16**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Identification and appropriate archival of obsolete documents.

PBMDR.7 **EP: 17**
New EP Text:
 The following records are retained for a minimum of 5 years: Identification and appropriate archival of obsolete documents.

PBMDR.7 **EP: 17**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Description and evaluation of nonconformances.

PBMDR.7 **EP: 18**
New EP Text:
 The following records are retained for a minimum of 5 years: Description and evaluation of nonconformances.

PBMDR.7 **EP: 18**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Reviews of results of internal and external assessments and associated corrective and preventive action.

PBMDR.7 **EP: 19**
New EP Text:
 The following records are retained for a minimum of 5 years: Reviews of results of internal and external assessments and associated corrective and preventive action.

PBMDR.7 **EP: 19**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Implementation of changes to policies, processes, and procedures resulting from corrective and preventive action.

PBMDR.7 **EP: 20**
New EP Text:
 The following records are retained for a minimum of 5 years: Implementation of changes to policies, processes, and procedures resulting from corrective and preventive action.

PBMDR.7 **EP: 20**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Corrective action.

PBMDR.7 **EP: 21**
New EP Text:
 The following records are retained for a minimum of 5 years: Corrective action.

PBMDR.7 **EP: 21**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 5 years: Preventive action.

PBMDR.7 **EP: 22**
New EP Text:
 The following records are retained for a minimum of 5 years: Preventive action.

PBMDR.7 **EP: 22**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 2 years after retirement of the system: Implementation of new or modified software, hardware, or databases and modifications of existing software, hardware, or databases.

PBMDR.7 **EP: 23**
New EP Text:
 The following records are retained for a minimum of 2 years after retirement of the system: Implementation of new or modified software, hardware, or databases and modifications of existing software, hardware, or databases.

PBMDR.7 **EP: 23**
Current EP Text: **Revision Type:** Moved
 The following records are retained for a minimum of 2 years after retirement of the system: Information systems records that include the following:
 - Validation of system software, hardware, databases, and user-defined tables.
 - Fulfillment of applicable life-cycle requirements.
 - Numerical designation of system versions, if applicable, with inclusive dates of use.
 - Monitoring of data integrity for critical data elements.

PBMDR.7 **EP: 24**
New EP Text:
 The following records are retained for a minimum of 2 years after retirement of the system: Information systems records that include the following:
 - Validation of system software, hardware, databases, and user-defined tables.
 - Fulfillment of applicable life-cycle requirements.
 - Numerical designation of system versions, if applicable, with inclusive dates of use.
 - Monitoring of data integrity for critical data elements.

Organization (PBMOR) Chapter

Standard PBMOR.3

Requirement Text:

The program defines the roles and responsibilities of the medical director.

PBMOR.3

EP: 2

Current EP Text:

Revision Type: Revised

The medical director’s responsibilities shall include, but not be limited to:

- Leadership and oversight on clinical issues.
- Consultative and support services on patient blood management matters that relate to the care and safety of patients.
- Identification of program resources needed to conform to these PBM standards.
- Communication of program results and opportunities for improvement to executive management and hospital staff at least annually.

PBMOR.3

EP: 2

New EP Text:

The medical director’s responsibilities shall include, but is not limited to, the following:

- Leadership and oversight on clinical issues.
- Consultative and support services on patient blood management matters that relate to the care and safety of patients.
- Identification of program resources needed to conform to these PBM standards.
- Communication of program results and opportunities for improvement to executive management and hospital staff at least annually.

Standard PBMOR.4

Requirement Text:

The executive management defines, oversees, and monitors the activities of the program.

Note: A patient blood management program can be designated as a program activity level 1, 2, or 3. Depending on the designated activity level, the program shall be responsible for or have direct involvement with oversight and monitoring of the various activities defined in PBMOR.4, EPs 2–21. (See also Appendix A)

PBMOR.4

EP: 2

Current EP Text:

Revision Type: Revised

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Evidence of institutional support for the patient blood management program at the executive level.

PBMOR.4

EP: 2

New EP Text:

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Evidence of institutional support for the patient blood management program at the hospital administration level.

PBMOR.4

EP: 6

Current EP Text:

Revision Type: Revised

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Assessment of potential need for blood usage.

PBMOR.4

EP: 6

New EP Text:

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Patient- or case-specific assessment of potential blood usage.

PBMOR.4

EP: 8

Current EP Text:

Revision Type: Deleted

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Identification and management of presurgical anemia before elective procedures for which type and screen or type and crossmatch is recommended.

PBMOR.4

EP: 9

Current EP Text:

Revision Type: Moved and Revised

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Preprocedure optimization of patient coagulation function including discontinuation of medications and herbal supplements that impair coagulation function.

PBMOR.4

EP: 8

New EP Text:

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Preprocedure optimization of patient coagulation function including discontinuation of medications and herbal supplements that impair hemostasis.

PBMOR.4

EP: 10

Current EP Text:

Revision Type: Moved and Revised

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Percentage of blood components wasted by component type (such as general red cells, rare unit red cells, general platelets, matched platelets, plasma, AB plasma, cryoprecipitate, and granulocytes) and cause (misordering, mishandling, not released in a timely manner, outdating in stock, etc).

PBMOR.4

EP: 9

New EP Text:

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Percentage of blood components wasted by component type (such as red cells, rare unit red cells, platelets, matched platelets, plasma, AB plasma, cryoprecipitate, and granulocytes) and cause for wastage (misordering, mishandling, not releasing in a timely manner, outdating in stock, and so forth).

PBMOR.4

EP: 11

Current EP Text:

Revision Type: Moved

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Minimize blood loss due to laboratory testing.

PBMOR.4

EP: 10

New EP Text:

The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Minimize blood loss due to laboratory testing.

<p>PBMOR.4 Current EP Text: N/A</p>	<p>EP: Revision Type: New</p>	<p>PBMOR.4 New EP Text: The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: A formal program to care for patients who decline use of blood or blood-derived products.</p>	<p>EP: 18</p>
<p>PBMOR.4 Current EP Text: The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Treatment of massive blood loss (massive transfusion) including timely delivery of proper ratios of blood components.</p>	<p>EP: 18 Revision Type: Moved and Revised</p>	<p>PBMOR.4 New EP Text: The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Identification and management of pre-surgical anemia before elective procedures for which type and screen or type and crossmatch is recommended.</p>	<p>EP: 19</p>
<p>PBMOR.4 Current EP Text: The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Use of perioperative techniques consistent with current AABB Standards for Perioperative Autologous Blood Collection and Administration.</p>	<p>EP: 19 Revision Type: Moved</p>	<p>PBMOR.4 New EP Text: The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: Use of perioperative techniques consistent with current AABB Standards for Perioperative Autologous Blood Collection and Administration.</p>	<p>EP: 20</p>
<p>PBMOR.4 Current EP Text: The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: An active program with evidence-based metrics and clinician feedback to ensure compliance with transfusion guidelines.</p>	<p>EP: 20 Revision Type: Moved</p>	<p>PBMOR.4 New EP Text: The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: An active program with evidence-based metrics and clinician feedback to ensure compliance with transfusion guidelines.</p>	<p>EP: 21</p>
<p>PBMOR.4 Current EP Text: The program shall be responsible for, or have direct involvement with, oversight and monitoring of the following activities: A formal program to care for patients who decline use of blood or blood-derived products.</p>	<p>EP: 21 Revision Type: Deleted</p>		

Standard PBMOR.5

Requirement Text:

The program defines the roles and responsibilities of the program team.

PBMOR.5

EP: 2

Current EP Text:

The program shall include representatives from transfusion medicine, informatics, quality assurance, pharmacy, nursing, laboratory, and other departments that regularly transfuse or recommend the transfusion of blood products and components.

Revision Type: Revised

PBMOR.5

EP: 2

New EP Text:

The program shall include representatives from administration, transfusion medicine, informatics, quality assurance, pharmacy, nursing, laboratory, and other departments that regularly transfuse, provide recommendations, or have programmatic responsibility for the oversight of the transfusion of blood products.

Standard PBMOR.8

Requirement Text:

The program has emergency operation policies, processes, and procedures.

PBMOR.8

EP: 3

Current EP Text:

The program, in conjunction with the transfusion medicine department, shall ensure that blood conservation policies, processes, and procedures are used in the event of a disaster.

Revision Type: Deleted

PBMOR.8

EP: 3

New EP Text:

The emergency management plan, including emergency communication systems, shall be tested at defined intervals.

PBMOR.8

EP: 4

Current EP Text:

The emergency management plan, including emergency communication systems, shall be tested at defined intervals.

Revision Type: Moved

Process Control (PBMP) Chapter

Standard PBMP.3

Requirement Text:

The program has patient blood management guidelines.

PBMP.3

EP: 1

Current EP Text:

The program shall establish evidence-based (when available) patient blood management guidelines for both adult and pediatric patients, specific to the hospital's patient population.

Revision Type: Revised

PBMP.3

EP: 1

New EP Text:

The program shall establish evidence-based (when available) patient blood management guidelines specific to the hospital's patient population.

Standard PBMP.4

Requirement Text:

The program reviews patient blood management practices.

PBMP.4

EP: 1

Current EP Text:

The program shall review patient blood management practices in a prospective, concurrent, and/or retrospective manner.

Revision Type: Revised

PBMP.4

EP: 1

New EP Text:

The program shall have a process for ongoing review of patient blood management practices.

Standard PBMP.C.5

Requirement Text:

The program has educational materials.

PBMP.C.5

EP: 1

Current EP Text:

Revision Type: Revised

The program shall develop and distribute educational materials for hospital personnel and patients that:

- Describe patient blood management.
- Discuss the risks and benefits of transfusion of blood products and components and transfusion avoidance.
- Review the alternatives to transfusion, including pharmacological therapies.

PBMP.C.5

EP: 1

New EP Text:

The program shall develop and distribute educational materials for hospital personnel and patients that are as follows:

- Describe patient blood management.
- Discuss the risks and benefits of transfusion of blood products and components and transfusion avoidance.
- Review the alternatives to transfusion, including pharmacological therapies.

Standard PBMP.C.6

Requirement Text:

The program has a quality control program.

PBMP.C.6

EP: 1

Current EP Text:

Revision Type: Revised

A program of quality control shall be established that is sufficiently comprehensive to ensure that patient blood management–related equipment and methods function as expected.

PBMP.C.6

EP: 1

New EP Text:

A program of quality control shall be established and is sufficiently comprehensive to ensure that patient blood management–related equipment and methods function as expected.

PBMP.C.6

EP: 2

Current EP Text:

Revision Type: Revised

Results shall be reviewed and corrective action taken when appropriate.

PBMP.C.6

EP: 2

New EP Text:

Quality control results shall be reviewed and corrective action is taken.

Standard PBMP.C.8

Requirement Text:

The program has guidelines for phlebotomy, transfusion orders, and for pre- and posttransfusion patient care.

PBMP.C.8

EP:

PBMP.C.8

EP: 1

Current EP Text:

Revision Type: New

New EP Text:

N/A

The program shall have defined guidelines for transfusion orders that include indications for transfusion.

PBMP.C.8

EP: 1

PBMP.C.8

EP: 2

Current EP Text:

Revision Type: Moved

New EP Text:

The program shall have guidelines for patient care in the pre- and posttransfusion settings.

The program shall have guidelines for patient care in the pre- and posttransfusion settings.

PBMP.C.8

EP: 2

PBMP.C.8

EP: 3

Current EP Text:

Revision Type: Moved and Revised

New EP Text:

The program shall review, revise, or create the policies, processes, and procedures regarding pretransfusion testing.

The program shall review, revise, or create the policies, processes, and procedures regarding pretransfusion testing consistent with the current edition of AABB Standards for Blood Banks and Transfusion Services.

PBMP.C.8

EP: 3

Current EP Text:

Revision Type: Deleted

Pretransfusion testing policies shall be consistent with the current edition of AABB Standards for Blood Banks and Transfusion Services.

PBMP.C.8

EP: 8

PBMP.C.8

EP: 4

Current EP Text:

Revision Type: Moved and Revised

New EP Text:

The program shall review, revise, or create policies, processes, and procedures that minimize blood loss during phlebotomy for laboratory testing.

The program shall review, revise, or create policies, processes, and procedures that minimize blood volume collected for laboratory testing.

PBMPC.8 **EP: 4**
Current EP Text: **Revision Type:** Moved
 The program shall create, review, and revise, as necessary, the policies, processes, and procedures to measure transfusion effectiveness and appropriateness.

PBMPC.8 **EP: 5**
New EP Text:
 The program shall create, review, and revise, as necessary, the policies, processes, and procedures to measure transfusion effectiveness and appropriateness.

PBMPC.8 **EP: 5**
Current EP Text: **Revision Type:** Moved
 The program shall implement transfusion guidelines and monitor adherence to these guidelines.

PBMPC.8 **EP: 6**
New EP Text:
 The program shall implement transfusion guidelines and monitor adherence to these guidelines.

PBMPC.8 **EP: 6**
Current EP Text: **Revision Type:** Moved and Revised
 Situations of overtransfusion or failure to transfuse when indicated shall be evaluated and root cause analysis performed.

PBMPC.8 **EP: 7**
New EP Text:
 Situations of over-transfusion, or when a failure to transfuse is identified, shall be evaluated and, if indicated, root cause analysis performed.

PBMPC.8 **EP: 7**
Current EP Text: **Revision Type:** Moved and Revised
 Data regarding adherence to transfusion guidelines shall be shared with executive management and department chairs at least quarterly and with the hospital executive and quality committees at least annually.

PBMPC.8 **EP: 8**
New EP Text:
 Data regarding adherence to patient blood management guidelines shall be shared with supervisory personnel at least quarterly and with the hospital administration and quality committees at least annually.

Standard PBMP.C.9

Requirement Text:

The program has procedures for preoperative or preintervention patient care.

PBMP.C.9

EP: 1

Current EP Text:

Revision Type: Revised

The program shall oversee and review:

- The maximum surgical blood ordering schedule (MSBOS) or equivalent and update if needed. At a minimum, the MSBOS shall be reviewed biennially.
- Procedures for identification of patients who refuse transfusion.
- Procedures for identification of patients who may benefit from interventions intended to reduce the need for allogeneic transfusion and optimize transfusion safety.
- The prescribing and ordering of appropriate blood components or transfusion-related pharmaceuticals (for example, factor concentrates, antifibrinolytics, hemostatic agents).

PBMP.C.9

EP: 1

New EP Text:

The program shall oversee and review the following:

- The maximum surgical blood ordering schedule (MSBOS) or equivalent and update if needed. At a minimum, the MSBOS shall be reviewed biennially.
- Procedures for identification of patients who refuse transfusion.
- Procedures for interventions to reduce the use of allogeneic transfusion.
- The prescribing and ordering of appropriate blood components or transfusion-related pharmaceuticals (for example, factor concentrates, antifibrinolytics, hemostatic agents).

PBMP.C.9

EP: 2

Current EP Text:

Revision Type: Revised

For patients undergoing elective high blood loss procedures (maximum surgical blood ordering schedule requires type and crossmatch), the following shall be performed sufficiently in advance of the planned procedure to allow for successful treatment:

- Evaluation and treatment of preprocedure anemia.
- Assurance of safe and effective discontinuation of anticoagulants.
- Assessment of bleeding risk.
- Assessment of physiologic ability to tolerate anemia, iron deficiency, and coagulation systems stress.
- Consideration and plan for allogeneic blood needs and their alternatives, including clinically indicated preoperative autologous blood donation, intraoperative blood recovery, acute normovolemic hemodilution, treating postoperative anemia with medications, and/or anemia tolerance.

PBMP.C.9

EP: 2

New EP Text:

For patients undergoing elective surgery, the following shall be performed sufficiently in advance of the planned procedure to allow for successful treatment:

- Evaluation and management of preprocedure anemia.
- Assurance of safe and effective discontinuation of anticoagulants and/or platelet inhibitors.
- Assessment of bleeding risk.
- Assessment of physiologic ability to tolerate anemia, iron deficiency, and coagulation systems stress.
- Consideration and plan for allogeneic blood needs and their alternatives, including clinically indicated preoperative autologous blood donation, intraoperative blood recovery, hemostatic agents, acute normovolemic hemodilution, treating postoperative anemia with medications, and/or anemia tolerance.

PBMPC.9

EP: 3

Current EP Text:

Revision Type: Revised

For patients undergoing emergent/urgent treatment, there shall be procedures for the following:

- Identification of unknown patients.
- Timely delivery of blood components.
- Intraoperative and other mechanisms to stop bleeding.
- Methods to safely reinfuse recovered blood.
- Mechanisms to assess bleeding risk due to anticoagulants and protocols for rapid reversal of platelet inhibitors and anticoagulants, where applicable reversal agents are available.
- Mechanisms to assess patients' physiologic ability to tolerate anemia.

PBMPC.9

EP: 3

New EP Text:

For patients undergoing emergent/urgent treatment, there shall be processes and/or procedures for the following:

- Identification of unknown patients.
- Assessment of patients' physiologic ability to tolerate blood loss.
- Timely delivery of blood components.
- Interventions to stop bleeding.
- Assessment of bleeding risk.
- Consideration of directed interventions including hemostatic agents and protocols for rapid reversal of anticoagulants.
- Assessment of safely recovering and reinfusing shed blood.

Standard PBMPC.10

Requirement Text:

The program has procedures to review intraoperative methods for patient blood management during surgery and invasive procedures.

PBMPC.10

EP:

Current EP Text:

Revision Type: New

N/A

PBMPC.10

EP: 1

New EP Text:

The program shall define and review methods for minimizing blood loss during surgery or invasive procedures.

Standard PBMPC.11

Requirement Text:

The program oversees postoperative or postintervention patient care.

PBMPC.10

EP: 1

Current EP Text:

Revision Type: Moved

The program shall oversee and review compliance with established patient blood management guidelines.

PBMPC.11

EP: 1

New EP Text:

The program shall oversee and review compliance with established patient blood management guidelines.

Standard PBMP.12

Requirement Text:

The program has procedures for patients who do not require invasive procedures.

PBMPC.11

EP: 1

Current EP Text:

The program shall oversee and review:

- Procedures for identification of patients who refuse transfusion.
- Procedures for identification of patients who may benefit from medications or treatments to reduce the need for allogeneic transfusion.
- The prescribing and ordering of appropriate blood components or transfusion options.

Revision Type: Moved and Revised

PBMPC.12

EP: 1

New EP Text:

The program shall oversee and review the following:

- Procedures for identification of patients who refuse transfusion.
- Procedures for identification of patients who may benefit from medications or treatments to reduce the need for allogeneic transfusion.
- The prescribing and ordering of blood components or alternatives to transfusion.

Standard PBMP.13

Requirement Text:

The program has processes and procedures for massive blood loss and emergent care.

PBMPC.12

EP: 1

Current EP Text:

The program shall oversee and review the development of a protocol for managing massive blood loss and timely delivery of blood components for patients experiencing massive bleeding.

Revision Type: Moved and Revised

PBMPC.13

EP: 1

New EP Text:

The program shall have processes and procedures for managing massive blood loss and timely delivery of blood components for patients experiencing massive bleeding and other emergent situations.

PBMPC.12

EP: 2

Current EP Text:

The program shall ensure compliance with the protocol for the management and delivery of blood components in a timely manner for patients experiencing massive blood loss.

Revision Type: Moved and Revised

PBMPC.13

EP: 2

New EP Text:

The program shall ensure compliance with the processes and procedures for the management and delivery of blood components for patients with emergency blood requirements, including massive blood loss.

Standard PBMP.14**Requirement Text:**

The program reviews data from other service lines that affect the quality of the program's activities.

PBMP.13**EP: 1****Current EP Text:**

The program shall obtain and review the following data at least quarterly (unless noted):

- Blood component use.
 - Blood component wastage and outdating, including reasons for unused components.
 - Crossmatch to transfusion ratio.
 - Deviation from transfusion service procedures or protocols.
 - Transfusion reactions.
 - Use of intraoperative blood recovery equipment and quality control.
 - Informed consent for blood transfusion documentation.
 - Data on massive transfusion protocol effectiveness.
 - Blood infusion equipment (for example, IV pumps) and warmer(s) maintenance program (annually).
 - External assessment results (for example, AABB or equivalent accrediting body) (biennially).
- (See also PBMP.3, EP 1)

Revision Type: Moved and Revised**PBMP.14****EP: 1****New EP Text:**

The program shall obtain and review the following data at least quarterly (unless noted):

- Blood component use.
 - Blood component wastage and outdating, including reasons for unused components.
 - Crossmatch to transfusion ratio.
 - Deviation from transfusion service procedures or protocols.
 - Transfusion reactions.
 - Use of intraoperative blood recovery equipment and quality control.
 - Informed consent for blood transfusion documentation.
 - Massive transfusion protocol use.
 - Blood infusion equipment (for example, IV pumps) and warmer(s) maintenance program (annually).
 - External assessment results (for example, AABB or equivalent accrediting body) (biennially).
- (See also PBMP.3, EP 1)

Process Improvement Through Corrective and Preventive Action

Standard PBMPI.2

Requirement Text:

The program has a process for corrective action.

PBMPI.2

EP: 2

Current EP Text:

Revision Type: Revised

The process for corrective action of deviations, nonconformances, and complaints includes the following elements:

- Description of the event.
- Investigation of the cause.
- Determination of the corrective action.
- Evaluation to ensure that corrective action is taken and that it is effective.

PBMPI.2

EP: 2

New EP Text:

The process for corrective action of deviations, nonconformances, and complaints includes the following elements:

- Description of the event
- Investigation of the cause
- Determination of the corrective action(s)
- Implementation of correction action(s)
- Evaluation to ensure that corrective action is taken and that it is effective

PBMPI.2

EP: 3

Current EP Text:

Revision Type: Revised

The program shall monitor:

- A provider's ordering practices.
- Use of transfusion and/or alternatives.
- Effectiveness of transfusions and/or alternatives.
- Adverse events, including suspected transfusion reactions and other patient complications.

PBMPI.2

EP: 3

New EP Text:

The program shall monitor the following:

- A provider's ordering practices
- Use of transfusion and/or alternatives
- Effectiveness of transfusions and/or alternatives
- Adverse events, including suspected transfusion reactions and other patient complications

Note: These Findings shall be reported to the provider(s) by the medical director of the program.

PBMPI.2

EP: 4

Current EP Text:

Revision Type: Deleted

Findings shall be given to the ordering provider(s) by the medical director of the program.

Standard PBMPI.3**Requirement Text:**

The program has a process for preventive action.

PBMPI.3**EP: 1****Current EP Text:****Revision Type:** Revised

The program shall have a process for preventive action that includes the following elements: Review of information including assessment results and complaints to detect and analyze potential causes of nonconformances.

PBMPI.3**EP: 1****New EP Text:**

The program shall have a process for preventive action that includes the following elements:

- Review of information, including assessment results and complaints, to detect and analyze potential causes of nonconformances
- Determination of steps needed to respond to potential problems requiring preventive action
- Initiation of preventive actions to respond to nonconformances and application of controls to monitor effectiveness

PBMPI.3**EP: 2****Current EP Text:****Revision Type:** Deleted

The program shall have a process for preventive action that includes the following elements: Determination of steps needed to respond to potential problems requiring preventive action.

PBMPI.3**EP: 3****Current EP Text:****Revision Type:** Deleted

The program shall have a process for preventive action that includes the following elements: Initiation of preventive action and application of controls to monitor effectiveness.

Resources (PBMRS) Chapter

Standard PBMRS.2

Requirement Text:

Staff are qualified, trained, and competent to perform their responsibilities.

PBMRS.2

EP: 6

Current EP Text:

Individuals who order and/or transfuse blood shall have credentials to do so from the hospital or other credentialing body.

PBMRS.2

EP: 6

New EP Text:

Individuals who order and/or transfuse blood shall meet facility-defined requirements for education related to patient blood management.