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Joint Commission and AABB Patient Blood Management Certification helped MedStar Georgetown University Hospital address population health challenges and reduce transfusions.

SITUATION

In spring 2016, MedStar Georgetown University Hospital, a not-for-profit, acute care academic medical center in northwest Washington, D.C., decided to pursue Joint Commission and AABB certification in patient blood management (PBM). The hospital wanted to both formalize and validate its approach to transfusion therapy while identifying new opportunities to further improve the PBM program by focusing initially on three groups of patients:

Bloodless surgery patients: The organization had a long-established bloodless medicine and surgery program before expanding into a broader PBM program. The practices utilized in optimizing clinical outcomes for those patients who decline transfusion therapy for religious reasons became the cornerstone of the PBM program.

Orthopedic patients: Prior to the PBM program, it was common to give two units of blood to patients, both during surgery for blood loss and/or after surgery when rehabilitating patients complained of fatigue.

Medical patients: At the time, general medicine patients, including those with chronic illnesses, were using the majority of the blood at MedStar Georgetown. The goal was to identify better approaches to improve clinical outcomes through fewer transfusions for this group.

SOLUTION

To begin the process, MedStar Georgetown introduced a project manager to guide it through the PBM certification process. This individual identified participants in each part of the survey process, discussed preparation processes, developed written documentation and guided the development of a quality plan that identified the team's focus, goals and methodology. The MedStar team also performed a gap analysis to identify areas that would require new focus to meet the standards and identified computerized provider order entry as an effective PBM tool to reduce transfusions and encourage providers to consider risks and benefits for transfusion therapy. The MedStar Georgetown team also designated a nurse coordinator to preempt another challenge: creating consistency every day of the week — including weekends and holidays — so that someone on staff could be available to prevent an inadvertent transfusion in a bloodless patient or consult with a patient who did not want to get a transfusion.





RESULTS

To date, MedStar Georgetown's Joint Commission- and AABB-certified PBM program has



Reduced transfusions to just 1 percent in total knee replacements and less than 5 percent in total hip replacements. Collected transfusion data for hospitalized patients with chronic health care issues and provided best practices.

Conducted a two-month review of all wound care patients which determined that 85 percent of these patients have anemia or chronic disease, eliminating unnecessary transfusions and providing them an opportunity to manage their conditions properly.