Extending the Blood Supply – 10 Tips for Hospitals

This list includes AABB resources, tips, new information and resources shared with AABB for hospitals to consider when reviewing strategies and policies regarding the blood supply.

- In support of AABB member requests, we will continue to update this document.
- Please check for updates to this and our other CORONAVIRUS RESOURCES frequently.

1. Consider encouraging the use of O-negative red blood cells (RBC) only for women of childbearing age and for patients with the anti-D antibody.
   - AABB Association Bulletin 19-02: Recommendations on the Use of Group O Red Blood Cells
   - Choosing Wisely: Five Things Physicians and Patients Should Question

2. Consider the use of A plasma for massive transfusions.

3. Consider developing strategies for limited-resource situations.
   - Disaster Preparedness: *AABB News* – January 2019

4. Develop contingency plans for potential blood shortages.
   - Blood Component Shortage Notification and Contingency Plan

5. Consider crossmatching a unit of RBC to more than one patient.

6. Consider the use of perioperative autologous blood salvage.
   - Standards for a Patient Blood Management Program
   - Standards for Perioperative Autologous Blood Collection and Administration
7. Consider lowering transfusion triggers for platelets and RBC.
   • Choosing Wisely: Five Things Physicians and Patients Should Question
   • AABB’s Patient Blood Management Toolkit

8. Consider taking steps to switch from O RBC to type-specific RBC transfusions in massive transfusion protocols.
   • AABB Association Bulletin 19-02: Recommendations on the Use of Group O Red Blood Cells

9. For stable non-emergency patients, orders for two or more units at one time may be reviewed to determine if fewer units/one unit may be adequate to treat the patient (give one, then reassess).
   • AABB’s Patient Blood Management Toolkit

10. Letter To Members of the Transfusion Medicine Community – Verax Biomedical Inc, 03 26 2020
    • Seven-Day Platelets