

#AABBPEPTALK Transcript

Healthcare social media transcript of the #AABBPEPTALK hashtag.

Tue, March 26th 2019, 1:00PM – Wed, March 27th 2019, 1:20PM (America/New_York).

See #AABBPEPTALK Influencers/Analytics.



Richard Kaufman @RichardMKaufman

a day ago

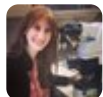
Hi everyone and welcome to our #AABBPEPTalk on electronic positive patient identification (ePPID). @JeannieCallum is also here to answer questions and continue the discussion.



Jeannie Callum @JeannieCallum

a day ago

Twittering in from Toronto @Sunnybrook and excited to be part of the ePPID movement - helping to solve the "identity crisis" in healthcare! #AABBPEPTalk with @RichardMKaufman <https://t.co/movHByJUTB>



Daniela Hermelin, MD @HermelinDaniela

a day ago

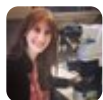
RT @RichardMKaufman: Hi everyone and welcome to our #AABBPEPTalk on electronic positive patient identification (ePPID). @JeannieCallum is a...



Justin Kreuter, MD @KreuterMD

a day ago

@TeamCaptainJohn Hi John! Great to see you on today's #AABBPEPTalk



Daniela Hermelin, MD @HermelinDaniela

a day ago

RT @JeannieCallum: Twittering in from Toronto @Sunnybrook and excited to be part of the ePPID movement - helping to solve the "identity cri...



AABB @AABB

a day ago

Welcome to everyone joining us for today's #AABBPEPTalk with @RichardMKaufman and @JeannieCallum! Where are you tweeting from?



Richard Kaufman @RichardMKaufman

a day ago

Who's joining us today? Let us know where you are and why you're interested in ePPID #AABBPEPTalk



Justin Kreuter, MD @KreuterMD

a day ago

RT @RichardMKaufman: Hi everyone and welcome to our #AABBPEPTalk on electronic positive patient identification (ePPID). @JeannieCallum is a...



Justin Kreuter, MD @KreuterMD

a day ago

RT @JeannieCallum: Twittering in from Toronto @Sunnybrook and excited to be part of the ePPID movement - helping to solve the "identity cri...



Richard Kaufman @RichardMKaufman

a day ago

Please remember to include #AABBPEPTalk



AABB @AABB

a day ago

Q1: Does your facility currently use electronic positive patient identification (ePPID)? #AABBPEPTalk #transfusionj
<https://t.co/XijYFsmae>



Dana Bostic @ThatLabChick

a day ago

@emckaymd @HermelinDaniela @RichardMKaufman @JeannieCallum @FionaFloyd @OlaYahaya @DrobenaMD @StuartLord4 @faye_y_yang @nourhisham87 @DianvanderwalDr Yes it is as a part of the #TwitterChat series. Their page recommends following @aabb and hashtag #AABBPEPtalk



Justin Kreuter, MD @KreuterMD

a day ago

@RichardMKaufman Joining #AABBPEPTalk from gorgeous Rochester, MN! Always interested in serving the needs of our patients 👍 <https://t.co/l3a0T38x67>



AABB @AABB

a day ago

Please don't forget to use A1, A2 and so forth in your answers/comments. #AABBPEPtalk



Jeannie Callum @JeannieCallum

a day ago

We have 80% of samples collected with ePPID including our high acuity areas like the ED. Patients have a barcoded wristband in all areas. We use separate software for sample collection and the pre-transfusion check. #AABBPEPtalk (1/2)



AABB @AABB

a day ago

RT @KreuterMD: @RichardMKaufman Joining #AABBPEPTalk from gorgeous Rochester, MN! Always interested in serving the needs of our patients 👍...



John Sherbeck MD @TeamCaptainJohn

a day ago

@AABB A1. No. My system has made multiple attempts to go-live, before i started my position, but IT priorities at the higher-up level has forced delays/changes in device/software. Hoping we go live in the next 2-3 years. #AABBPEPTalk

**AABB @AABB**

a day ago

RT @JeannieCallum: Twittering in from Toronto @Sunnybrook and excited to be part of the ePPID movement - helping to solve the "identity cri...

**Jeannie Callum @JeannieCallum**

a day ago

We have different set-ups in each area – wall mounted with scanners, laptops on wheels, handheld devices – whatever best fits the workflow for the nursing teams. Here is our set up in the ICU #AABBPEPTalk (2/2) <https://t.co/eUtDSF811B>

**Richard Kaufman @RichardMKaufman**

a day ago

@TeamCaptainJohn #AABBPEPTalk Definitely agree. The science doesn't matter if we can't take care of the basics of getting the correct sample.

**Justin Kreuter, MD @KreuterMD**

a day ago

RT @AABB: Q1: Does your facility currently use electronic positive patient identification (ePPID)? #AABBPEPTalk #transfusionj <https://t.co/...>

**Eileen McKay @emckaymd**

a day ago

@TeamCaptainJohn @AABB A1. Yes we instituted in fall of 2017 for blood bank specimens only. Plan to make universal later this year. #AABBPEPTalk

**Justin Kreuter, MD @KreuterMD**

a day ago

@AABB #AABBPEPTalk A1. Yes, we do!

**AABB @AABB**

a day ago

RT @JeannieCallum: We have different set-ups in each area – wall mounted with scanners, laptops on wheels, handheld devices – whatever best...

**AABB @AABB**

a day ago

RT @RichardMKaufman: @TeamCaptainJohn #AABBPEPTalk Definitely agree. The science doesn't matter if we can't take care of the basics of gett...

**Justin Kreuter, MD @KreuterMD**

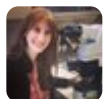
a day ago

@RichardMKaufman @TeamCaptainJohn Wonderful to have these numbers in the recommended reading to support our efforts! #AABBPEPTalk

**Jeannie Callum @JeannieCallum**

a day ago

replying to @TeamCaptainJohn - Don't despair! It took us 13 years of pushing to get this done. What really created momentum was showing everyone in our hospital that "wrong patient" events were all too common. #AABBPEPTalk

**Daniela Hermelin, MD @HermelinDaniela**

a day ago

@RichardMKaufman Interested in optimizing PPID in the trauma setting. #AABBPEPTalk

**AABB @AABB**

a day ago

RT @JeannieCallum: replying to @TeamCaptainJohn - Don't despair! It took us 13 years of pushing to get this done. What really created momen...

**Aaron D. Shmookler @AShmooklerMD**


a day ago

@KreuterMD @AABB A1. Yep :) #AABBPEPTalk


**Richard Kaufman @RichardMKaufman**


a day ago


#AABBPEPTalk


 **Dana Bostic @ThatLabChick** a day ago
👉 I'm following the #AABBPEPTalk now! 🙋 Is anyone else joining the #TwitterChat on using technology to prevent blood transfusion errors? I will be reading the comments 📖 for current practices. 🙌 #Lab4Life #WeSaveLivesEveryday #Blooducation #LabTwitter #MedTwitter #AcademicTwitter


 **Cindy Flores @cindyfloresmd** a day ago
@AABB A1. A few tertiary and children's health services AUS do use ePPID - there's ePPID for pretransfusion (including electronic crossmatching) and administration. #AABBPEPTalk

 **Justin Kreuter, MD @KreuterMD** a day ago
Awareness is the first step in the ADKAR change management model! #AABBPEPTalk

 **Daniela Hermelin, MD @HermelinDaniela** a day ago
@AABB A1: Yes, our facility does currently use ePPID. #AABBPEPTalk

 **Sue T Johnson @SueTJohnson** a day ago
Data is so important to influence change and... perservance! #AABBPEPTalk @JeannieCallum @RichardMKaufman

 **Jeannie Callum @JeannieCallum** a day ago
@TeamCaptainJohn Also key to have a gradual rollout so you don't overwhelm the IT and clinical teams. Slow and sure wins the race. #AABBPEPTalk

 **Eileen McKay @emckaymd** a day ago
RT @AABB: Q1: Does your facility currently use electronic positive patient identification (ePPID)? #AABBPEPTalk #transfusionj <https://t.co/...>

**AABB @AABB**

a day ago

RT @ThatLabChick: 📌 I'm following the #AABBPEPTalk now! 🙋 Is anyone else joining the #TwitterChat on using technology to prevent blood tran...

**AABB @AABB**

a day ago

RT @SueTJohnson: Data is so important to influence change and... perservance! #AABBPEPTalk @JeannieCallum @RichardMKaufman <https://t.co/Es...>

**AABB @AABB**

a day ago

RT @JeannieCallum: @TeamCaptainJohn Also key to have a gradual rollout so you don't overwhelm the IT and clinical teams. Slow and sure wins...

**Justin Kreuter, MD @KreuterMD**

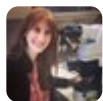
a day ago

@ThatLabChick Welcome Dana! I'm excited to have your voice in the mix today :-) #AABBPEPTalk

**Jeannie Callum @JeannieCallum**

a day ago

@SueTJohnson @RichardMKaufman We use the Transfusion Error Surveillance System built on the US MERS-TM error tracking system so we have GREAT data! #AABBPEPTalk

**Daniela Hermelin, MD @HermelinDaniela**

a day ago

@HollenhorstM @AABB @RichardMKaufman @JeannieCallum @StanfordMed @StanfordHealth Hi Marie! It's so nice to have you join us 😊 #AABBPEPTalk

**Cindy Flores @cindyfloresmd**

a day ago

@AABB @RichardMKaufman @JeannieCallum 🇺🇸😊 Good morning! #AABBPEPTalk

**AABB @AABB**

a day ago

Q2: What challenges have you encountered with implementing or using ePPID? What safety shortcuts have you seen? #AABBPEPtalk #transfusionj <https://t.co/CgO8Ngm7Yk>

**Richard Kaufman @RichardMKaufman**

a day ago

@cindyfloresmd @AABB Using ePPID for just before hanging a unit of blood is probably one of the best things you can do for safety. #AABBPEPTalk

**Justin Kreuter, MD @KreuterMD**

a day ago

RT @JeannieCallum: @SueTJohnson @RichardMKaufman We use the Transfusion Error Surveillance System built on the US MERS-TM error tracking sy...

**Jeannie Callum @JeannieCallum**

a day ago

@AABB There are so many shortcuts I can't fit them in! Healthcare teams are SO CREATIVE. Printing another wristband and taping to the computer or bedside table is a problem – what happens when a new patient is admitted and someone forgot to remove the wristband?? #AABBPEPtalk (1/2)

**Jeannie Callum @JeannieCallum**

a day ago

@AABB The other common issue is a “blended” labelling error. Using a manual system for the requisition and ePPID for the sample – then the 2 don't match! Trying to get the team to use ePPID for the paperwork is key. #AABBPEPtalk (2/2)

**Justin Kreuter, MD @KreuterMD**

a day ago

RT @AABB: Q2: What challenges have you encountered with implementing or using ePPID? What safety shortcuts have you seen? #AABBPEPtalk #tra...



Eileen McKay @emckaymd

a day ago

RT @ThatLabChick: ←I'm following the #AABBPEPTalk now! 🏠 Is anyone else joining the #TwitterChat on using technology to prevent blood tran...



Richard Kaufman @RichardMKaufman

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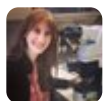
In our study of ePPID we found that the most common source of error was collecting samples from patients who were not wearing their wristbands. #AABBPEPTalk #transfusionj



Aaron D. Shmookler @AShmooklerMD

a day ago

@AABB A2. We rely on computers so much to the point that we sometimes forget to think about what we are doing, especially during a downtime. #AABBPEPTalk



Daniela Hermelin, MD @HermelinDaniela

a day ago

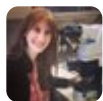
RT @JeannieCallum: We have different set-ups in each area – wall mounted with scanners, laptops on wheels, handheld devices – whatever best...



AABB @AABB

a day ago

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Daniela Hermelin, MD @HermelinDaniela

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AABB @AABB

a day ago

RT @RichardMKaufman: @cindyfloresmd @AABB Using ePPID for just before hanging a unit of blood is probably one of the best things you can do...



John Sherbeck MD @TeamCaptainJohn

a day ago

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AABB @AABB

a day ago

RT @JeannieCallum: @AABB There are so many shortcuts I can't fit them in! Healthcare teams are SO CREATIVE. Printing another wristband and...



AABB @AABB

a day ago

RT @JeannieCallum: @AABB The other common issue is a "blended" labelling error. Using a manual system for the requisition and ePPID for the...



Justin Kreuter, MD @KreuterMD

a day ago

@AABB #AABBPEPTalk A2. Unfortunately, have seen people performing the identification procedure after starting the transfusion <https://t.co/XC1NMOKjqH>



Sue T Johnson @SueTJohnson

a day ago

@JeannieCallum @AABB Who usually catches the "blended" labelling error? #AABBPEPTalk



Cindy Flores @cindyfloresmd

a day ago

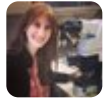
@RichardMKaufman @AABB Agree it was all about #patientsafety. It was a win for the Blood Management team at the institution - even only for the admin part of ePPID. It took them years to implement but all worth it to avoid the near-misses. #AABBPEPTalk



Richard Kaufman @RichardMKaufman

a day ago

@HermelinDaniela Unfortunately WBIT samples do happen often enough that they can be tracked prospectively. #AABBPEPTalk



Daniela Hermelin, MD @HermelinDaniela

a day ago

@JeannieCallum Do you mind expanding on the separate software used for your pre-transfusion checkpoint?
#AABBPEPTalk



AABB @AABB

a day ago

RT @RichardMKaufman: In our study of ePPID we found that the most common source of error was collecting samples from patients who were not...



AABB @AABB

a day ago

RT @AShmooklerMD: @AABB A2. We rely on computers so much to the point that we sometimes forget to think about what we are doing, especially...



Justin Kreuter, MD @KreuterMD

a day ago

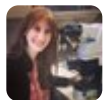
RT @JeannieCallum: @AABB There are so many shortcuts I can't fit them in! Healthcare teams are SO CREATIVE. Printing another wristband and...



AABB @AABB

a day ago

RT @KreuterMD: @AABB #AABBPEPTalk A2. Unfortunately, have seen people performing the identification procedure after starting the transfusio...



Daniela Hermelin, MD @HermelinDaniela

a day ago

RT @RichardMKaufman: In our study of ePPID we found that the most common source of error was collecting samples from patients who were not...



AABB @AABB

a day ago

RT @RichardMKaufman: @HermelinDaniela Unfortunately WBIT samples do happen often enough that they can be tracked prospectively. #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

@RichardMKaufman @AABB @cindyfloresmd Key thing you need to teach anesthesia and the OR teach is NOT to "pre-check blood" minutes to hours before. It must be IMMEDIATELY before! #AABBPEPTalk



AABB @AABB

a day ago

RT @JeannieCallum: @RichardMKaufman @AABB @cindyfloresmd Key thing you need to teach anesthesia and the OR teach is NOT to "pre-check blood..."



Justin Kreuter, MD @KreuterMD

a day ago

RT @JeannieCallum: @AABB The other common issue is a "blended" labelling error. Using a manual system for the requisition and ePPID for the...



Justin Kreuter, MD @KreuterMD

a day ago

RT @RichardMKaufman: In our study of ePPID we found that the most common source of error was collecting samples from patients who were not...



Aaron D. Shmookler @AShmooklerMD

a day ago

@RichardMKaufman @HermelinDaniela Why does it scare me so much that you can _prospectively_ track this? Yikes! #AABBPEPTalk



Tim Hannon, MD @TimHannonMD

a day ago

#TransfusionSafety is more than pathogen reduction- it's a vein-to-vein process! Join the #AABBPEPTalk happening right now on reducing bedside transfusion errors! #PatientSafety



Justin Kreuter, MD @KreuterMD

a day ago

RT @JeannieCallum: @RichardMKaufman @AABB @cindyfloresmd Key thing you need to teach anesthesia and the OR teach is NOT to "pre-check blood..."



Jeannie Callum @JeannieCallum

a day ago

@HermelinDaniela We use a software called "BloodTrack" that runs on all our desktops and handhelds and checks the 5 identifiers in the wristband and compatibility label PLUS the unit number. If they don't match a fire alarm like noise goes off. #AABBPEPTalk



AABB @AABB

a day ago

RT @TimHannonMD: #TransfusionSafety is more than pathogen reduction- it's a vein-to-vein process! Join the #AABBPEPTalk happening right no...



AABB @AABB

a day ago

RT @JeannieCallum: @HermelinDaniela We use a software called "BloodTrack" that runs on all our desktops and handhelds and checks the 5 iden...



Jeannie Callum @JeannieCallum

a day ago

@AShmooklerMD @AABB A2 Yes! We need to practice our downtime procedures or we get paralysis in healthcare IT downtimes. #AABBPEPTalk



AABB @AABB

a day ago

#AABBPEPtalk



AABB @AABB

a day ago

@emckaymd Please use the #AABBPEPtalk hashtag so that everyone can follow your insightful answers.



Richard Kaufman @RichardMKaufman

a day ago

@TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the wrong unit may be 1 in 14K. #AABBPEPTalk

**AABB @AABB**

a day ago

RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...

**Eileen McKay @emckaymd**

a day ago

RT @JeannieCallum: @RichardMKaufman @AABB @cindyfloresmd Key thing you need to teach anesthesia and the OR teach is NOT to "pre-check blood...

**John Sherbeck MD @TeamCaptainJohn**

a day ago

@RichardMKaufman @TimHannonMD Given your data, that 1 in 14K is on a GOOD day. #AABBPEPTalk

**Jeannie Callum @JeannieCallum**

a day ago

@AABB When we went live in our Emergency Department we needed IT people there round the clock until a sufficient number felt confident. #AABBPEPTalk

**Marie Hollenhorst, MD, PhD @HollenhorstM**

a day ago

RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...

**AABB @AABB**

a day ago

@ThatLabChick Please be sure to use the #AABBPEPTalk hashtag so that everyone will see your answers!

**Justin Kreuter, MD @KreuterMD**

a day ago

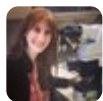
@cindyfloresmd @AABB Yes, transfusion safety education is so critical for helping our colleagues become aware of this unknown. #AABBPEPTalk



Eileen McKay @emckaymd

a day ago

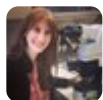
RT @TimHannonMD: #TransfusionSafety is more than pathogen reduction- it's a vein-to-vein process! Join the #AABBPEPTalk happening right no...



Daniela Hermelin, MD @HermelinDaniela

a day ago

@JeannieCallum Where can I get one? #AABBPEPTalk <https://t.co/vDJd1Sbi9x>



Daniela Hermelin, MD @HermelinDaniela

a day ago

RT @JeannieCallum: @HermelinDaniela We use a software called "BloodTrack" that runs on all our desktops and handhelds and checks the 5 iden...



Richard Kaufman @RichardMKaufman

a day ago

#AABBPEPTalk



AABB @AABB

a day ago

RT @KreuterMD: @cindyfloresmd @AABB Yes, transfusion safety education is so critical for helping our colleagues become aware of this unknow...



Dana Bostic @ThatLabChick

a day ago

@AABB Sorry and will do! #AABBPEPTalk 😊



Eileen McKay @emckaymd

a day ago

@AABB Sorry, new at this but I am a fast learner #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

@RichardMKaufman Some hospitals are using palmar vein scanning technology to identify patients - especially the confused and decreased LOC ones. #AABBPEPTalk



Aaron D. Shmookler @AShmooklerMD

a day ago

This is a very telling perspective regarding risk of hanging a wrong unit of blood vs. risk of a transfusion-transmitted infection 🤖 #AABBPEPTalk



AABB @AABB

a day ago

RT @JeannieCallum: @AABB When we went live in our Emergency Department we needed IT people there round the clock until a sufficient number...



AABB @AABB

a day ago

Q3: How can we apply the principles of ePPID to a massive transfusion setting? #AABBPEPTalk #transfusionj
<https://t.co/6uEcMwDpjX>



John Sherbeck MD @TeamCaptainJohn

a day ago

@KreuterMD @cindyfloresmd @AABB I've found that clinicians and administrators alike have the same response to the blood bank bringing up these issues: "OMG how can we help" Challenge is moving that into real action. #AABBPEPTalk



Sue T Johnson @SueTJohnson

a day ago

A2 So true, and heard about the blood bank system being down last night, oh no! But the SOPs were written so well the laboratory scientists felt confident they were doing the right thing. #AABBPEPTalk



Justin Kreuter, MD @KreuterMD

a day ago

RT @JeannieCallum: @AShmooklerMD @AABB A2 Yes! We need to practice our downtime procedures or we get paralysis in healthcare IT downtimes....



Dana Bostic @ThatLabChick

a day ago

@AABB A1: I know there is discussion of implementing an ePPID system at our facility. I'm excited to learn about what everyone is using in their institutions. As an educator, I try my best to share the different PPID practices utilized by transfusion med from site to site #AABBPEptalk



Eileen McKay @emckaymd

a day ago

RT @JeannieCallum: @HermelinDaniela We use a software called "BloodTrack" that runs on all our desktops and handhelds and checks the 5 iden...



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AABB @AABB

a day ago

RT @SueTJohnson: A2 So true, and heard about the blood bank system being down last night, oh no! But the SOPs were written so well the labo...



Jeannie Callum @JeannieCallum

a day ago

@AABB Q3 With a "code orange" mass casualty event key to use ePPID so the group check is not needed to move to group specific faster #AABBPEptalk (1/3)



Cindy Flores @cindyfloresmd

a day ago

#Bloodeducation is so critical for PPID that we produce a lot of resources on blood administration for it, and these have been popular in Australia. #AABBPEptalk



Justin Kreuter, MD @KreuterMD

a day ago

RT @TeamCaptainJohn: @KreuterMD @cindyfloresmd @AABB I've found that clinicians and administrators alike have the same response to the bloo...



Marie Spears @True_Attendant

a day ago

RT @SueTJohnson: A2 So true, and heard about the blood bank system being down last night, oh no! But the SOPs were written so well the labo...



Justin Kreuter, MD @KreuterMD

a day ago

RT @cindyfloresmd: #Bloodeducation is so critical for PPID that we produce a lot of resources on blood administration for it, and these hav...



AABB @AABB

a day ago

RT @JeannieCallum: @AABB Q3 With a "code orange" mass casualty event key to use ePPID so the group check is not needed to move to group spe...



Jeannie Callum @JeannieCallum

a day ago

@AABB Q3 Consider installing a computer controlled fridge in the trauma room and allow check-out of RBCs with a ePPID generated label #AABBPEPtalk (2/3)



Jeannie Callum @JeannieCallum

a day ago

@AABB Q3 Also always wanted to trial a massive hemorrhage pack with one barcode for the whole pack – check one barcode for the entire case! Now that would save time. #AABBPEPtalk (3/3)



Eileen McKay @emckaymd

a day ago

RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...



John Sherbeck MD @TeamCaptainJohn

a day ago

@AABB A3 Depends if it an emergency release or not; i don't care if the pt is Jimmy or Jenny, just get that blood into the vein. Retrospective use of ePPID defeats the purpose in xmc blood, but here its a tool that can help track unit dispo, which is intself a pt safety #AABBPEPTalk



Justin Kreuter, MD @KreuterMD

a day ago

RT @AABB: Q3: How can we apply the principles of ePPID to a massive transfusion setting? #AABBPEPTalk #transfusionj <https://t.co/6uEcMwDpjX>



Richard Kaufman @RichardMKaufman

a day ago

A2 Some were from outpatient clinics, where the provider decided to preprint labels before the patient arrived. The computer will never get the patient ID # wrong but the system has to be used right. #AABBPEPTalk



AABB @AABB

a day ago

#AABBPEPTalk participants: Please use the hashtag in all your tweets! Also please label your answers with the number of the question you're answering (A1, A2, etc) <https://t.co/XtjfhtpDNT>



Amy H. Deeken @AmyHDeekenMD

a day ago

RT @AABB: Q1: Does your facility currently use electronic positive patient identification (ePPID)? #AABBPEPTalk #transfusionj <https://t.co/...>



Dana Bostic @ThatLabChick

a day ago

@JeannieCallum @HermelinDaniela This is very interesting to know! I believe it is just as important for our Medical Laboratory Scientists working in the blood bank to know the full extent of the blood administration practices in their facilities. Many do not get this opportunity (unless they audit) #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

@AABB Q3 Be careful with trauma patients with multiple patients from the same vehicle - easy to get the patient's "purses" mixed up and mess up the registration. Always take the time to check the wristband verbally with the patient if alert before snapping it on! #AABBPEPTalk



AABB @AABB

a day ago

RT @JeannieCallum: @AABB Q3 Be careful with trauma patients with multiple patients from the same vehicle - easy to get the patient's "purse..."



Eileen McKay @emckaymd

a day ago

@TeamCaptainJohn @AABB A3 a bit more challenging if blood required before pretransfusion sample collected. Also wouldn't want to delay issuing products. Could be helpful in tracking transfused units if the second half was utilized with unit scan and patient id scan at time of transfusion #AABBPEPTalk



Eileen McKay @emckaymd

a day ago

RT @JeannieCallum: @AABB Q3 Be careful with trauma patients with multiple patients from the same vehicle - easy to get the patient's "purse..."



Justin Kreuter, MD @KreuterMD

a day ago

@AABB #AABBPEPTalk A3. Trauma activations are debriefed and have video review as well. Making it a routine point of discussion-- any transfusion challenges/opportunities?



Eileen McKay @emckaymd

a day ago

RT @AABB: #AABBPEPTalk participants: Please use the hashtag in all your tweets! Also please label your answers with the number of the quest...



Amy H. Deeken @AmyHDeekenMD

a day ago

RT @AABB: Q3: How can we apply the principles of ePPID to a massive transfusion setting? #AABBPEPTalk #transfusionj <https://t.co/6uEcMwDpjX>



Eileen McKay @emckaymd

a day ago

@JeannieCallum @AABB Q3 good idea for large trauma centers. We couldn't manage this at an inventory level in our small community site #AABBPEPTalk



Justin Kreuter, MD @KreuterMD

a day ago

@SueTJohnson How do we get folks outside the blood bank to follow SOP? #AABBPEPTalk



Marie Spears @True_Attendant

a day ago

RT @cindyfloresmd: #Bloodeducation is so critical for PPID that we produce a lot of resources on blood administration for it, and these hav...



Jeannie Callum @JeannieCallum

a day ago

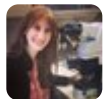
@KreuterMD @AABB That is so cool! Maybe a quality review of the time to putting on the wristband, and how often it is used versus some other identification. #AABBPEPTalk



Amy H. Deeken @AmyHDeekenMD

a day ago

RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...



Daniela Hermelin, MD @HermelinDaniela

a day ago

RT @AABB: Q3: How can we apply the principles of ePPID to a massive transfusion setting? #AABBPEPTalk #transfusionj <https://t.co/6uEcMwDpjX>

**AABB @AABB**

a day ago

RT @emckaymd: @TeamCaptainJohn @AABB A3 a bit more challenging if blood required before pretransfusion sample collected. Also wouldn't want...

**Mohammed Almohammadi @almohammadi77**

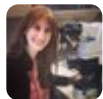
a day ago

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**Justin Kreuter, MD @KreuterMD**

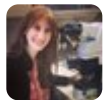
a day ago

RT @JeannieCallum: @AABB Q3 Also always wanted to trial a massive hemorrhage pack with one barcode for the whole pack – check one barcode f...

**Daniela Hermelin, MD @HermelinDaniela**

a day ago

RT @JeannieCallum: @AABB Q3 Consider installing a computer controlled fridge in the trauma room and allow check-out of RBCs with a ePPID ge...

**Daniela Hermelin, MD @HermelinDaniela**

a day ago

RT @JeannieCallum: @AABB Q3 Be careful with trauma patients with multiple patients from the same vehicle - easy to get the patient's "purse..."

**Yulia Lin @dryulialin**

a day ago

@JeannieCallum @AABB Any suggestions for how to manage e-PPID in the setting of the initial resuscitation when the patient is moving from trauma bay to CT to IR and then to the OR? #AABBPEPTalk

**Jeannie Callum @JeannieCallum**

a day ago

@KreuterMD @SueTJohnson Hmm...#AABBPEPTalk

**AABB @AABB**

a day ago

RT @KreuterMD: @AABB #AABBPEPTalk A3. Trauma activations are debriefed and have video review as well. Making it a routine point of discussi...

**Cindy Flores @cindyfloresmd**

a day ago

Audits, data and discussions at blood management committees are crucial for #patientsafety. There are audits on bedside checking (2 person check), transfusion documentation, specimen collection are available as resources. <https://t.co/YRSFtBH3sQ> #AABBPEPTalk <https://t.co/sTd7xkscwr>

**Mohammed Almohammadi @almohammadi77**

a day ago

RT @HermelinDaniela: 🗣️ Let's avoid incompatible transfusions! Please join me in 1 hour for #AABBPEPTalk with @RichardMKaufman and @JeannieC...

**Mohammed Almohammadi @almohammadi77**

a day ago

RT @JeannieCallum: Twittering in from Toronto @Sunnybrook and excited to be part of the ePPID movement - helping to solve the "identity cri...

**Justin Kreuter, MD @KreuterMD**

a day ago

RT @JeannieCallum: @AABB Q3 Be careful with trauma patients with multiple patients from the same vehicle - easy to get the patient's "purse...

**Richard Kaufman @RichardMKaufman**

a day ago

A3 It's really important to have a good system in place for providing temporary IDs quickly. Sometimes multiple patients will come in at the same time that aren't identified. This was a lesson we learned during the Boston Marathon bombing. #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

@dryulialin @AABB Use the mobile small handhelds version - take it with the patient - it has a long batter half-life
#AABBPEPTalk <https://t.co/2scaehnMLs>



AABB @AABB

a day ago

RT @cindyfloresmd: Audits, data and discussions at blood management committees are crucial for #patientsafety. There are audits on bedside...



Rodney E. Rohde, PhD "Doc R" @RodneyRohde

a day ago

RT @ThatLabChick: ←I'm following the #AABBPEPTalk now! 📱 Is anyone else joining the #TwitterChat on using technology to prevent blood tran...



Jeannie Callum @JeannieCallum

a day ago

@RichardMKaufman EVERY hospital has to have a plan for this. Otherwise you can't run any tests or scans until the patient is registered with a wristband. #AABBPEPTalk



Marie Hollenhorst, MD, PhD @HollenhorstM

a day ago

@KreuterMD @SueTJohnson I think this is a key question! RNs and MDs at the bedside have so many other priorities especially in acute situations, that can make it easy for the SOP to not be followed. #AABBPEPTalk



Eileen McKay @emckaymd

a day ago

RT @RichardMKaufman: A3 It's really important to have a good system in place for providing temporary IDs quickly. Sometimes multiple patien...



AABB @AABB

a day ago

RT @JeannieCallum: @RichardMKaufman EVERY hospital has to have a plan for this. Otherwise you can't run any tests or scans until the patien...



Aaron D. Shmookler @AShmooklerMD

a day ago

@JeannieCallum @AABB Very intriguing idea! However, would regulations permit one barcode for a whole pack?
#AABBPEPtalk



Justin Kreuter, MD @KreuterMD

a day ago

RT @cindyfloresmd: Audits, data and discussions at blood management committees are crucial for #patientsafety. There are audits on bedside...



Mohammed Almohammadi @almohammadi77

a day ago

RT @JeannieCallum: @AABB Q3 Consider installing a computer controlled fridge in the trauma room and allow check-out of RBCs with a ePPID ge...



Sue T Johnson @SueTJohnson

a day ago

@KreuterMD That is a great question. Keep educating on the importance of following SOPs. Maybe everyone should have required cGMP (good manufacturing practice) training like we do in the blood bank. #AABBPEPTalk



AABB @AABB

a day ago

RT @JeannieCallum: @AABB Q3 Consider installing a computer controlled fridge in the trauma room and allow check-out of RBCs with a ePPID ge...



Eileen McKay @emckaymd

a day ago

RT @JeannieCallum: @AShmooklerMD @AABB A2 Yes! We need to practice our downtime procedures or we get paralysis in healthcare IT downtimes....



Justin Kreuter, MD @KreuterMD

a day ago

RT @RichardMKaufman: A3 It's really important to have a good system in place for providing temporary IDs quickly. Sometimes multiple patien...



Jeannie Callum @JeannieCallum

a day ago

@AShmooklerMD @AABB The IT controls, standards, and regulations have to evolve with the needs of our patients and IT needs. People used to think eCM was CRAZY but now we all do it. #AABBPEPTalk



Dana Bostic @ThatLabChick

a day ago

@KreuterMD @SueTJohnson Oh yes the magical question...@KreuterMD I had a recent conversation with a transfusion nurse about this ongoing issue. The insight offered was amazing yet scary at the same time. It starts with a conversation & interdisciplinary education is key for those involved #AABBPEPTalk <https://t.co/iZrL5iMzRe>



Daniela Hermelin, MD @HermelinDaniela

a day ago

@JeannieCallum @AABB There are so many ways to optimize this complex process. @JeannieCallum - If it hasn't been done already, your experience with PPID in the trauma setting would make a great "How do I" article in #TransfusionJ #AABBPEPTalk



Tim Hannon, MD @TimHannonMD

a day ago

@RichardMKaufman Another stat- the risk of a patient getting an unnecessary transfusion is still about 1 in 3! Physicians need to incorporate evidence based guidelines as a critical component of #TransfusionSafety! #Bloodeducation + Computer Decision Support helps #AABBPEPTalk #PatientSafety



Richard Kaufman @RichardMKaufman

a day ago

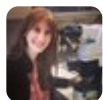
#AABBPEPTalk



Dr. Arwa AL-Riyami @DrRiyamia

a day ago

RT @cindyfloresmd: Audits, data and discussions at blood management committees are crucial for #patientsafety. There are audits on bedside...



Daniela Hermelin, MD @HermelinDaniela

a day ago

RT @RichardMKaufman: A3 It's really important to have a good system in place for providing temporary IDs quickly. Sometimes multiple patien...



Eileen McKay @emckaymd

a day ago

@AShmooklerMD @JeannieCallum @AABB A3 maybe if there were different levels of ID, individual units could be included in a group? #AABBPEPTalk



Aaron D. Shmookler @AShmooklerMD

a day ago

@JeannieCallum @AABB Agree. Conceptually, if it can be perceived technologically, then it can be done with appropriate safeguards. If only our FDA could keep up. #AABBPEPTalk



Amy H. Deeken @AmyHDeekenMD

a day ago

RT @TimHannonMD: @RichardMKaufman Another stat- the risk of a patient getting an unnecessary transfusion is still about 1 in 3! Physicians...



Jeannie Callum @JeannieCallum

a day ago

@HermelinDaniela @AABB I have started to think that our approach to the bleeding trauma patient needs to be more rapid - kind of like the pit stop for NASCAR - they can change 4 tires and refuel in under 30 seconds - we can do things much faster if we just put our minds to it. #AABBPEPTalk



AABB @AABB

a day ago

RT @JeannieCallum: @AShmooklerMD @AABB The IT controls, standards, and regulations have to evolve with the needs of our patients and IT nee...



Eduardo Nunes @theeduardonunes

a day ago

this is basically an evergreen tweet #AABBPEPTalk

**AABB @AABB**

a day ago

RT @ThatLabChick: @KreuterMD @SueTJohnson Oh yes the magical question...@KreuterMD I had a recent conversation with a transfusion nurse abo...

**AABB @AABB**

a day ago

RT @HermelinDaniela: @JeannieCallum @AABB There are so many ways to optimize this complex process. @JeannieCallum - If it hasn't been don...

**AABB @AABB**

a day ago

Q4: What solutions have you found for the operating room where the wristband is often under the drapes? #AABBPEPTalk #transfusionj <https://t.co/DN9adMNPUD>

**John Sherbeck MD @TeamCaptainJohn**

a day ago

RT @HermelinDaniela: @JeannieCallum @AABB There are so many ways to optimize this complex process. @JeannieCallum - If it hasn't been don...

**Eileen McKay @emckaymd**

a day ago

RT @TimHannonMD: @RichardMKaufman Another stat- the risk of a patient getting an unnecessary transfusion is still about 1 in 3! Physicians...

**AABB @AABB**

a day ago

RT @emckaymd: @AShmooklerMD @JeannieCallum @AABB A3 maybe if there were different levels of ID, individual units could be included in a gro...

**AABB @AABB**

a day ago

RT @AShmooklerMD: @JeannieCallum @AABB Agree. Conceptually, if it can be perceived technologically, then it can be done with appropriate sa...

**AABB @AABB**

a day ago

RT @theeduardonunes: this is basically an evergreen tweet #AABBPEPtalk <https://t.co/jEiaZLuYKk>**AABB @AABB**

a day ago

RT @JeannieCallum: @HermelinDaniela @AABB I have started to think that our approach to the bleeding trauma patient needs to be more rapid -...

**Sue T Johnson @SueTJohnson**

a day ago

RT @ThatLabChick: @KreuterMD @SueTJohnson Oh yes the magical question...@KreuterMD I had a recent conversation with a transfusion nurse abo...

**Dana Bostic @ThatLabChick**

a day ago

Alarming statistic! This is a great discussion @AABB on how we can decrease blood transfusion errors through the use of electronic positive patient identification (ePPID)! We need to incorporate evidence based guidelines and best practices that ensure #patientsafety #AABBPEPtalk

**Justin Kreuter, MD @KreuterMD**

a day ago

RT @AABB: Q4: What solutions have you found for the operating room where the wristband is often under the drapes? #AABBPEPtalk #transfusion...

**Jeannie Callum @JeannieCallum**

a day ago

@AABB Q4 Our OR IT team was awesome when they implemented ePPID. The OR system detects the patient RFID enter the room, he checks patient ID verbally, and then scans wristband. Only if we have a 3-way match will the barcode be displayed on the computers in the room. #AABBPEPtalk (1/3)



Jeannie Callum @JeannieCallum

a day ago

@AABB Q4 After the RFID is detected exiting the OR room a timer starts counting 10 minutes and then the barcode disappears so there is no possible chance it could be used for the next patient. #AABBPEPtalk (2/3)



AABB @AABB

a day ago

RT @JeannieCallum: @AABB Q4 Our OR IT team was awesome when they implemented ePPID. The OR system detects the patient RFID enter the room,...



AABB @AABB

a day ago

RT @JeannieCallum: @AABB Q4 After the RFID is detected exiting the OR room a timer starts counting 10 minutes and then the barcode disappea...



John Sherbeck MD @TeamCaptainJohn

a day ago

@AABB A4: I dislike the "this card stays with the patient" strategy. Some thoughts: Temporary tattoo on the forehead placed by the patient/family in pre-op. Scanner that is placed with the wristband under sheets, activated wirelessly. Both of these are serious ideas. #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

@AABB Q4 We also allow the anesthesiologist to generate a "spare label" for the OR record with the patient barcode so they can check the blood if someone is on their computer. But only 1 spare label! The computer prevents multiple prints :) #AABBPEPtalk (3/3)



Cindy Flores @cindyfloresmd

a day ago

<https://t.co/3fYMsgeOnh> Introduction to double independent checking for non-electronic PPID. Otherwise one person could do it with ePPID. #AABBPEPTALK #Blooducation #PatientSafety

**AABB @AABB**

a day ago

RT @TeamCaptainJohn: @AABB A4: I dislike the "this card stays with the patient" strategy. Some thoughts: Temporary tattoo on the forehead...

**AABB @AABB**

a day ago

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**Jeannie Callum @JeannieCallum**

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**Cindy Flores @cindyfloresmd**

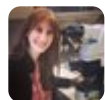
a day ago

RT @ThatLabChick: Alarming statistic! This is a great discussion @AABB on how we can decrease blood transfusion errors through the use of e...

**Dr. Arwa AL-Riyami @DrRiyamia**

a day ago

@JeannieCallum @AABB @HermelinDaniela That is amazing! I want one of these! How long it took you to implement such a system hospital wide? #AABBPEPTalk

**Daniela Hermelin, MD @HermelinDaniela**

a day ago

@JeannieCallum @AABB I agree. 🙌 I'm excited to be partners with our trauma surgeons in working on these logistics. #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

@cindyfloresmd @AABB We have used ePPID in our outpatient transfusion unit - huge improvement in nursing workload. #AABBPEPTalk



Justin Kreuter, MD @KreuterMD

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Eileen McKay @emckaymd

a day ago

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Richard Kaufman @RichardMKaufman

a day ago

A4 One advantage of the OR is that there is only one patient in the room but it can be risky if barcodes are printed and left around. These could end up on another patient. #AABBPEPTalk



AABB @AABB

a day ago

RT @DrRiyamia: @JeannieCallum @AABB @HermelinDaniela That is amazing! I want one of these! How long it took you to implement such a system...



Justin Kreuter, MD @KreuterMD

a day ago

RT @JeannieCallum: @AABB Q4 We also allow the anesthesiologist to generate a "spare label" for the OR record with the patient barcode so th...



AABB @AABB

a day ago

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Justin Kreuter, MD @KreuterMD

a day ago

RT @cindyfloresmd: <https://t.co/3fYMsgeOnh> Introduction to double independent checking for non-electronic PPID. Otherwise one person could...



Jeannie Callum @JeannieCallum

a day ago

@DrRiyamia @AABB @HermelinDaniela From beginning to end for a 1000 bed hospital you are looking at 2 years of fun :) #AABBPEPTalk



Richard Kaufman @RichardMKaufman

a day ago

These could end up on a subsequent OR patient's sample. #AABBPEPTalk



AABB @AABB

a day ago

RT @JeannieCallum: @cindyfloresmd @AABB We have used ePPID in our outpatient transfusion unit - huge improvement in nursing workload. #AABB...



AABB @AABB

a day ago

RT @RichardMKaufman: A4 One advantage of the OR is that there is only one patient in the room but it can be risky if barcodes are printed a...



Eileen McKay @emckaymd

a day ago

@AABB A4 to be honest, I hadn't considered this obstacle before. Now I am going to ask my OR educators how they train to this and perform pre-transfusion checks. #AABBPEPTalk



Justin Kreuter, MD @KreuterMD

a day ago

Absolutely-- growth mindset and collaborative spirit are necessary! #AABBPEPTalk



Eileen McKay @emckaymd

a day ago

One way mislabeled specimens happen - extra labels not properly discarded. Also implies verification of actual label not performed prior to specimen submission #AABBPEPTalk



Aaron D. Shmookler @AShmooklerMD

a day ago

@RichardMKaufman Unfortunately I've seen it happen where patient ID from a previous case is left behind and ends up in a current case. #AABBPEPTalk



AABB @AABB

a day ago

Last question! Q5: Does anyone do rapid assessments of ePPID errors to get to the true bottom of how the error happened? #AABBPEPTalk #transfusionj <https://t.co/H18L0YcrmU>



Cindy Flores @cindyfloresmd

a day ago

@JeannieCallum @AABB Agree! Impact on workload, resources and #patientsafety. A good investment. #AABBPEPTALK



Eileen McKay @emckaymd

a day ago

Time course for implementation of ePPID for transfusion safety #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

@AABB Q5 We just started doing this. You need to find the nurse or physician that just made the error to really understand where the technology is falling short. Waiting till 3 days later is useless – they won't even remember who the patient was! #AABBPEPTalk



John Sherbeck MD @TeamCaptainJohn

a day ago

@AShmooklerMD @RichardMKaufman Ive seen in with anatomic pathology specimens. As the great Jeff Goldblum says: Nature finds a way. #AABBPEPTalk



Justin Kreuter, MD @KreuterMD

a day ago

@RichardMKaufman I made this exact error during an autopsy! We all make mistakes and need to embrace systems that help us be better. #AABBPEPTalk



D Flood @myglobalpac

a day ago

RT @JeannieCallum: @AABB Q3 Be careful with trauma patients with multiple patients from the same vehicle - easy to get the patient's "purse..."



D Flood @myglobalpac

a day ago

RT @AABB: Q3: How can we apply the principles of ePPID to a massive transfusion setting? #AABBPEPTalk #transfusionj <https://t.co/6uEcMwDpjX>



AABB @AABB

a day ago

RT @JeannieCallum: @AABB Q5 We just started doing this. You need to find the nurse or physician that just made the error to really understa...



Yulia Lin @dryulialin

a day ago

@AABB Q5: And how often do errors in the e-PPID setting happen compared to standard patient ID errors? #AABBPEPTalk



Aaron D. Shmookler @AShmooklerMD

a day ago

@TeamCaptainJohn @RichardMKaufman #AABBPEPTalk <https://t.co/ohOjZ37PJv>



AABB @AABB

a day ago

RT @cindyfloresmd: @JeannieCallum @AABB Agree! Impact on workload, resources and #patientsafety. A good investment. #AABBPEPTALK



Justin Kreuter, MD @KreuterMD

a day ago

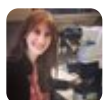
RT @AABB: Last question! Q5: Does anyone do rapid assessments of ePPID errors to get to the true bottom of how the error happened? #AABBPEP...



Richard Kaufman @RichardMKaufman

a day ago

@KreuterMD We see it all the time with fetal monitoring strips in labor and delivery. Those rooms turn over quickly. #AABBPEPTalk



Daniela Hermelin, MD @HermelinDaniela

a day ago

RT @AABB: Q4: What solutions have you found for the operating room where the wristband is often under the drapes? #AABBPEPtalk #transfusion...



Justin Kreuter, MD @KreuterMD

a day ago

@AABB #AABBPEPTalk A5. We do RCA, but doubt this could be called "rapid assessment." ;-)



Sue T Johnson @SueTJohnson

a day ago

Q5 No 24 hour rule to wait when it comes time to assess the cause of ePPID errors! The sooner the better for communication to occur. #AABBPEptalk



Justin Kreuter, MD @KreuterMD

a day ago

RT @JeannieCallum: @AABB Q5 We just started doing this. You need to find the nurse or physician that just made the error to really understa...



Jeannie Callum @JeannieCallum

a day ago

@dryulialin @AABB @RichardMKaufman see his Transfusion March issue paper (hot off the press) - before ePPID rate was 1 in 3000 to post 1 in 15,000. #AABBPEPTalk



Eileen McKay @emckaymd
#AABBPEPTalk

a day ago



AABB @AABB
#AABBPEPTalk

a day ago



AABB @AABB

RT @RichardMKaufman: @KreuterMD We see it all the time with fetal monitoring strips in labor and delivery. Those rooms turn over quickly. #...

a day ago



AABB @AABB

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AABB @AABB

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Justin Kreuter, MD @KreuterMD

RT @SueTJohnson: Q5 No 24 hour rule to wait when it comes time to assess the cause of ePPID errors! The sooner the better for communication...

a day ago



Richard Kaufman @RichardMKaufman

@SueTJohnson I agree. Every day that you wait means that details can be forgotten. #AABBPEPTalk

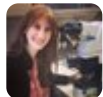
a day ago



Dr. Arwa AL-Riyami @DrRiyamia

a day ago

@JeannieCallum @AABB @HermelinDaniela Wow! We better start soon then! #AABBPEPTalk



Daniela Hermelin, MD @HermelinDaniela

a day ago

@TeamCaptainJohn @AABB A4: I have never thought about this problem. Maybe placing something around or clipped to the head cap? #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

@AABB Important not to just investigate and figure out why...but to count the error in your error tracking system. We must keep MEASURING. #AABBPEPTalk



AABB @AABB

a day ago

And that's all we have time for today, folks! Thank you everyone for participating and a special thanks to @RichardMKaufman and @JeannieCallum for leading today's #AABBPEPTalk. Fill out our chat survey: <https://t.co/iR9mRb5Zhl> <https://t.co/mK7aWapU9M>



Jennifer Becker @JeniBecks

a day ago

RT @RichardMKaufman: A3 It's really important to have a good system in place for providing temporary IDs quickly. Sometimes multiple patien...



D Flood @myglobalpac

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RT @SueTJohnson: Q5 No 24 hour rule to wait when it comes time to assess the cause of ePPID errors! The sooner the better for communication...

**AABB @AABB**

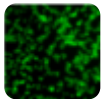
a day ago

This #AABBPEPTalk was held in partnership with AABB's peer-reviewed journal, TRANSFUSION. Access it today: <https://t.co/XuF5cFTQuz> #transfusionj

**Eileen McKay @emckaymd**

a day ago

@JeannieCallum @AABB A5 we do track all PPID "errors" #AABBPEPTalk

**Dr. SciGirl2010 @scigirl2010**

a day ago

RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...

**John Sherbeck MD @TeamCaptainJohn**

a day ago

@AABB WOW the time flies! Great talk everyone! #AABBPEPTalk

**Daniela Hermelin, MD @HermelinDaniela**

a day ago

RT @DrRiyamia: @JeannieCallum @AABB @HermelinDaniela Wow! We better start soon then! #AABBPEPTalk

**Richard Kaufman @RichardMKaufman**

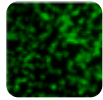
a day ago

Thanks for your participation. Let me know if you'd like to see more collaboration between @AABB and TRANSFUSION. #AABBPEPTalk

**AABB @AABB**

a day ago

RT @RichardMKaufman: @SueTJohnson I agree. Every day that you wait means that details can be forgotten. #AABBPEPTalk



Dr. SciGirl2010 @scigirl2010

a day ago

RT @RichardMKaufman: A3 It's really important to have a good system in place for providing temporary IDs quickly. Sometimes multiple patien...



Aaron D. Shmookler @AShmooklerMD

a day ago

@JeannieCallum @AABB @RichardMKaufman Thank you! This was a very informative session with great discussion. Lots for me to think about -- have a great day! #AABBPEPtalk



AABB @AABB

a day ago

RT @HermelinDaniela: @TeamCaptainJohn @AABB A4: I have never thought about this problem. Maybe placing something around or clipped to th...



AABB @AABB

a day ago

RT @JeannieCallum: @AABB Important not to just investigate and figure out why...but to count the error in your error tracking system. We mu...



Eileen McKay @emckaymd

a day ago

Great twitter chat about PPID for transfusion safety #AABBPEPTalk Thank you @RichardMKaufman and @JeannieCallum and all participants



AABB @AABB

a day ago

RT @emckaymd: @JeannieCallum @AABB A5 we do track all PPID "errors" #AABBPEPTalk



Aaron D. Shmookler @AShmooklerMD

a day ago

@RichardMKaufman @AABB Seconded! #AABBPEPtalk

**AABB @AABB**

a day ago

RT @RichardMKaufman: Thanks for your participation. Let me know if you'd like to see more collaboration between @AABB and TRANSFUSION. #AAB...

**AABB @AABB**

a day ago

RT @AShmooklerMD: @JeannieCallum @AABB @RichardMKaufman Thank you! This was a very informative session with great discussion. Lots for me t...

**Dr Sylvia Benjamin #hellomynameissylvie @Gogmum**

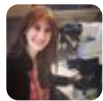
a day ago

Follow this if you are interested in #blood #transfusion #safety #bloodeducation #AABBPEPTalk

**D Flood @myglobalpac**

a day ago

RT @SueTJohnson: A2 So true, and heard about the blood bank system being down last night, oh no! But the SOPs were written so well the labo...

**Daniela Hermelin, MD @HermelinDaniela**

a day ago

@JeannieCallum @AABB I just realized that our Transfusion Administration Process Assessment documents if a nurse properly identifies the E number and name on patient's armband and matches with paperwork. But this assessment can be optimized for the TRAUMA BAY! #AABBPEPTalk <https://t.co/iaJgnyIL78>

**AABB @AABB**

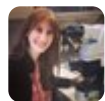
a day ago

RT @HermelinDaniela: @JeannieCallum @AABB I just realized that our Transfusion Administration Process Assessment documents if a nurse prop...

**Richard Kaufman @RichardMKaufman**

a day ago

RT @JeannieCallum: @dryulialin @AABB @RichardMKaufman see his Transfusion March issue paper (hot off the press) - before ePPID rate was 1 i...



Daniela Hermelin, MD @HermelinDaniela

a day ago

@RichardMKaufman @AABB What an AWESOME #AABBPEPTalk! 🕒 I can't believe that the hour is up! Important topic + fabulous moderators + great discussion = SUCCESS 🎉 🙏 Thank you so much for organizing and providing so much guidance and information @RichardMKaufman and @JeannieCallum 🗨️ Yes, again!



Dana Bostic @ThatLabChick

a day ago

@emckaymd @AABB This is one of my soapboxes...why are lab personnel not being trained so that we can help w/ these questions? As a blood banker, it's valuable 2 have access to both sides of this "IT barrier." This access allows us to support the work we (as a team) do for patients. #AABBPEPTalk



Dr Sylvia Benjamin #hellomynameissylvie @Gogmum

a day ago

#AABBPEPTalk Watch this - how we #train our students, doctors and nurses in #blood #transfusion : <https://t.co/W0qMhLuvJi> #blooducation



Dr. Arwa AL-Riyami @DrRiyamia

a day ago

@AABB @RichardMKaufman @JeannieCallum This was very interesting discussion. Many thanks! It is my first experience and I learnt alot. I look forward to the next #AABBPEPTalk ! Have a good day/night wherever you are 😊



Rodney E. Rohde, PhD "Doc R" @RodneyRohde

a day ago

RT @ThatLabChick: Alarming statistic! This is a great discussion @AABB on how we can decrease blood transfusion errors through the use of e...



Justin Kreuter, MD @KreuterMD

a day ago

RT @JeannieCallum: @AABB Important not to just investigate and figure out why...but to count the error in your error tracking system. We mu...



Justin Kreuter, MD @KreuterMD

a day ago

@AABB @RichardMKaufman @JeannieCallum Thank you, @JeannieCallum & @RichardMKaufman 🙏 So wonderful to have the #blooducation community engaged with #AABBPEPTalk



Jeannie Callum @JeannieCallum

a day ago

RT @KreuterMD: @AABB @RichardMKaufman @JeannieCallum Thank you, @JeannieCallum & @RichardMKaufman 🙏 So wonderful to have the #blooducation...



AABB @AABB

a day ago

RT @KreuterMD: @AABB @RichardMKaufman @JeannieCallum Thank you, @JeannieCallum & @RichardMKaufman 🙏 So wonderful to have the #blooducation...



Kerri Wachter @knwachter

a day ago

RT @HermelinDaniela: @JeannieCallum @AABB I just realized that our Transfusion Administration Process Assessment documents if a nurse prop...



Dana Bostic @ThatLabChick

a day ago

This was an awesome #AABBPEPtalk today! Thank you @AABB @RichardMKaufman & @JeannieCallum A B AB O
It was a great chat with fellow #TwitterChat participants as well! Kudos to all for championing #patientsafety & promoting best practices in #TransfusionMedicine via #blooducation



Justin Kreuter, MD @KreuterMD

a day ago

RT @ThatLabChick: @emckaymd @AABB This is one of my soapboxes...why are lab personnel not being trained so that we can help w/ these questi...



Justin Kreuter, MD @KreuterMD

a day ago

@DrRiyamia @AABB @RichardMKaufman @JeannieCallum Thank you for joining and adding your perspectives-- our community is strongest with more voices! #AABBPEPTalk



AABB @AABB

a day ago

RT @DrRiyamia: @AABB @RichardMKaufman @JeannieCallum This was very interesting discussion. Many thanks! It is my first experience and I lea...



AABB @AABB

a day ago

RT @Gogmum: #AABBPEPTalk Watch this - how we #train our students, doctors and nurses in #blood #transfusion : <https://t.co/W0qMhLuvJi> #bloo...



Bassim Albeirouti @BassimBeirouti

a day ago

RT @JeannieCallum: We have 80% of samples collected with ePPID including our high acuity areas like the ED. Patients have a barcoded wristb...



Bassim Albeirouti @BassimBeirouti

a day ago

RT @JeannieCallum: replying to @TeamCaptainJohn - Don't despair! It took us 13 years of pushing to get this done. What really created momen...



Bassim Albeirouti @BassimBeirouti

a day ago

RT @JeannieCallum: We have different set-ups in each area – wall mounted with scanners, laptops on wheels, handheld devices – whatever best...



Bassim Albeirouti @BassimBeirouti

a day ago

RT @JeannieCallum: Twittering in from Toronto @Sunnybrook and excited to be part of the ePPID movement - helping to solve the "identity cri...



Bassim Albeirouti @BassimBeirouti

a day ago

RT @JeannieCallum: @cindyfloresmd @AABB We have used ePPID in our outpatient transfusion unit - huge improvement in nursing workload. #AABB...



Eileen McKay @emckaymd

a day ago

RT @ThatLabChick: @emckaymd @AABB This is one of my soapboxes...why are lab personnel not being trained so that we can help w/ these questi...



Dr Sylvia Benjamin #hellomynameissylvie @Gogmum

a day ago

RT @RichardMKaufman: Thanks for your participation. Let me know if you'd like to see more collaboration between @AABB and TRANSFUSION. #AAB...



Julie Wright @JulesWright22

21 hours ago

RT @HermelinDaniela: 🗨️ Let's avoid incompatible transfusions! Please join me in 1 hour for #AABBPEPTalk with @RichardMKaufman and @JeannieC...



Julie Wright @JulesWright22

21 hours ago

RT @KreuterMD: FYI spread the word! #blooducation #transfusion #labmed colleagues— in 4 hours #AABBPEPTalk is the place to be for insightfu...



Ritcha Saxena, MD @RitchaSaxena

20 hours ago

RT @AABB: Q3: How can we apply the principles of ePPID to a massive transfusion setting? #AABBPEPTalk #transfusionj <https://t.co/6uEcMwDpjX>



Ritcha Saxena, MD @RitchaSaxena

20 hours ago

RT @AABB: Q4: What solutions have you found for the operating room where the wristband is often under the drapes? #AABBPEPTalk #transfusion...



Ritcha Saxena, MD @RitchaSaxena

20 hours ago

RT @RichardMKaufman: In our study of ePPID we found that the most common source of error was collecting samples from patients who were not...



Dr Suzy M_rt_n @TransfusionWM

20 hours ago

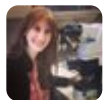
RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...



@suzannedocherty @suzannedocherty

20 hours ago

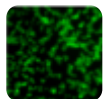
RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...



Daniela Hermelin, MD @HermelinDaniela

20 hours ago

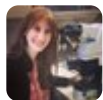
@RichardMKaufman @TimHannonMD Those statistics certainly make you pause. #AABBPEPTalk



Dr. SciGirl2010 @scigirl2010

19 hours ago

RT @RichardMKaufman: Thanks for your participation. Let me know if you'd like to see more collaboration between @AABB and TRANSFUSION. #AAB...



Daniela Hermelin, MD @HermelinDaniela

19 hours ago

RT @RichardMKaufman: A4 One advantage of the OR is that there is only one patient in the room but it can be risky if barcodes are printed a...



Daniela Hermelin, MD @HermelinDaniela

19 hours ago

RT @KreuterMD: @SueTJohnson How do we get folks outside the blood bank to follow SOP? #AABBPEPTalk

Haemovigilance Guy @Haemovigilante

18 hours ago



Positive patient ID is surely fundamental for #patientsafety across the whole hospital not just transfusion. Drug and surgical errors are significant risks also. IT or biometric solutions cost effective and thus more attractive if seen as beneficial institution-wide #AABBPEPTalk

Terrie Foster 🇺🇸 @terriefosterRN

18 hours ago



RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...

AABB @AABB

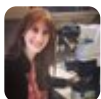
17 hours ago



RT @Haemovigilante: Positive patient ID is surely fundamental for #patientsafety across the whole hospital not just transfusion. Drug and s...

Daniela Hermelin, MD @HermelinDaniela

17 hours ago



@JeannieCallum @AABB After today's #AABBPEPTalk, experienced unique PPID error. Sample arrived. As specimen was collected, a change in the patient's name has just been corrected in chart. Error made at the time of admission. Source of error was before blood draw. We had to recollect sample 🙄

Jeannie Callum @JeannieCallum

17 hours ago



@HermelinDaniela @AABB In person and come asking for their CSI help - that usually gets a laugh and the conversation off on the right foot - it helps that every nurse knows me from 20 years at my hospital - get out there and be seen #AABBPEPTalk

Jeannie Callum @JeannieCallum

17 hours ago



@SueTJohnson @AABB The MLTs scrutinize every single sample @Sunnybrook when it arrives - they miss NOTHING #AABBPEPTalk



Eileen McKay @emckaymd

16 hours ago

RT @Haemovigilante: Positive patient ID is surely fundamental for #patientsafety across the whole hospital not just transfusion. Drug and s...



Daniela Hermelin, MD @HermelinDaniela

16 hours ago

@emckaymd @JeannieCallum @AABB Yes, it was such a pain. Especially because the patient is 8. Yet, another place to think about errors occurring. #AABBPEPTalk



AABB @AABB

16 hours ago

RT @JeannieCallum: @HermelinDaniela @AABB In person and come asking for their CSI help - that usually gets a laugh and the conversation off...



Dianne van der Wal @DianvanderwalDr

16 hours ago

RT @Haemovigilante: Positive patient ID is surely fundamental for #patientsafety across the whole hospital not just transfusion. Drug and s...



Akshay Sharma @AkshaySharmaMD

16 hours ago

RT @Haemovigilante: Positive patient ID is surely fundamental for #patientsafety across the whole hospital not just transfusion. Drug and s...



Lynn Schoenfield @LSchoenfieldMD

15 hours ago

RT @AShmooklerMD: @RichardMKaufman Unfortunately I've seen it happen where patient ID from a previous case is left behind and ends up in a...



Lynn Schoenfield @LSchoenfieldMD

15 hours ago

RT @AShmooklerMD: @AABB A2. We rely on computers so much to the point that we sometimes forget to think about what we are doing, especially...



Safalta @poorisafalta

15 hours ago

RT @JeannieCallum: @AABB Q3 Consider installing a computer controlled fridge in the trauma room and allow check-out of RBCs with a ePPID ge...



Eileen McKay @emckaymd

15 hours ago

@feachme Worth reviewing #AABBPEPTalk



Safalta @poorisafalta

15 hours ago

RT @JeannieCallum: @HermelinDaniela We use a software called "BloodTrack" that runs on all our desktops and handhelds and checks the 5 iden...



Karla @Kalos1929

13 hours ago

@RichardMKaufman #AABBPEPTalk From the State Blood Transfusion Center Puebla, Mexico. For transfusional safety to our patients.



Karla @Kalos1929

13 hours ago

@RichardMKaufman #AABBPEPTalk The traceability of our samples is broken from the moment the social worker does not correctly collect the data.



Karla @Kalos1929

13 hours ago

@RichardMKaufman #AABBPEPTalk Even if we had the best of systems, if the income is not correct, we fall into the error, Therefore, in all patients' income, the nurse must first certify the identification and then the doctor to the patient with an official credential.



Karla @Kalos1929

13 hours ago

@RichardMKaufman #AABBPEPTalk The system Print quickly, here the important thing is the excellent training of who collects the data in the system.



Karla @Kalos1929

13 hours ago

@RichardMKaufman Our big problem in Mexico is the undergraduate university students who are in charge of taking samples, they do not know how to enter the system and the traceability of the sample is lost.#AABBPEPTalk



Fiorella Urbina @FiorellaUrbina3

13 hours ago

RT @RichardMKaufman: @TimHannonMD The risk of many transfusion transmitted infections is now below 1 in 1 million. The risk of hanging the...



Karla @Kalos1929

13 hours ago

@RichardMKaufman @AABB Thanks for sharing. Of course I would like to know about @AABB and transfusion #AABBPEPTalk



Karla @Kalos1929

13 hours ago

RT @RichardMKaufman: Thanks for your participation. Let me know if you'd like to see more collaboration between @AABB and TRANSFUSION. #AAB...



Karla @Kalos1929

13 hours ago

RT @JeannieCallum: @dryulialin @AABB @RichardMKaufman see his Transfusion March issue paper (hot off the press) - before ePPID rate was 1 i...



NATA @NATAforum

10 hours ago

RT @AShmooklerMD: This is a very telling perspective regarding risk of hanging a wrong unit of blood vs. risk of a transfusion-transmitted...



NATA @NATAforum

10 hours ago

RT @JeannieCallum: We have 80% of samples collected with ePPID including our high acuity areas like the ED. Patients have a barcoded wristb...



Mary O Riordan @MCOR1963

9 hours ago

RT @AShmooklerMD: This is a very telling perspective regarding risk of hanging a wrong unit of blood vs. risk of a transfusion-transmitted...



Jeannie Callum @JeannieCallum

6 hours ago

@LouNine @NATAforum All lab samples including transfusion - we have to make sure the hemoglobin level is not from the wrong patient too! #AABBPEPTalk



AABB @AABB

6 hours ago

RT @Kalos1929: @RichardMKaufman #AABBPEPTalk The system Print quickly, here the important thing is the excellent training of who collects t...



AABB @AABB

6 hours ago

RT @JeannieCallum: @LouNine @NATAforum All lab samples including transfusion - we have to make sure the hemoglobin level is not from the wr...



Sue T Johnson @SueTJohnson

6 hours ago

RT @JeannieCallum: @LouNine @NATAforum All lab samples including transfusion - we have to make sure the hemoglobin level is not from the wr...



Arnethea L. Sutton @NeNe_LaShaun

6 hours ago

RT @TimHannonMD: @RichardMKaufman Another stat- the risk of a patient getting an unnecessary transfusion is still about 1 in 3! Physicians...



Justin Kreuter, MD @KreuterMD

5 hours ago

@TimHannonMD A lot has been done to ensure the blood inside the bag is very safe. However, transfusion safety occurs at the bedside, dependent on nurses & physicians... #AABBPEPTalk #TransfusionToons @AABB <https://t.co/peae8Xss8F>

Dana Bostic @ThatLabChick

4 hours ago



I love a good #TransfusionToon ♥ Terrific depiction of #BloodSafety versus #TransfusionSafety 🙌 Thank you for today's #WednesdayMotivation @KreuterMD to share ideas for improving transfusion safety. #AABBPEPTalk #Lab4Life #WeSaveLivesEveryday #WednesdayWisdom #PatientSafety

AABB @AABB

4 hours ago



RT @KreuterMD: @TimHannonMD A lot has been done to ensure the blood inside the bag is very safe. However, transfusion safety occurs at the...

Daniela Hermelin, MD @HermelinDaniela

4 hours ago



!?!?What's the difference between **BLOOD** safety and **TRANSFUSION** safety? 🙌 Check out this great educational cartoon by @KreuterMD and @tmalinMLS that takes you through the mindful, practical steps when transfusing at the bedside
[A] [B] [O] [AB] #Blooducation #AABBPEPTalk

Daniela Hermelin, MD @HermelinDaniela

4 hours ago



RT @TimHannonMD: #TransfusionSafety is more than pathogen reduction- it's a vein-to-vein process! Join the #AABBPEPTalk happening right no...

PbmOvestMilanese @PbmOvestMi

4 hours ago



RT @RichardMKaufman: In our study of ePPID we found that the most common source of error was collecting samples from patients who were not...

Andrew A. Higgins @AndrewAHiggins

3 hours ago



RT @KreuterMD: @TimHannonMD A lot has been done to ensure the blood inside the bag is very safe. However, transfusion safety occurs at the...



Matthew @Matthew09351501

3 hours ago

we use a bpam, blood product management system in the computer to ensure the product matches the patient. Try to catch errors at dispense. #patientsafety #AABBPEPTalk



Kerri Wachter @knwachter

2 hours ago

RT @HermelinDaniela: !?What's the difference between **BLOOD** safety and TRANSFUSION safety? 🖱️ Check out this great educational cartoon by @...



Kerri Wachter @knwachter

2 hours ago

No, I did not miss the #AABBPEPTalk chat yesterday. I was behind the scenes in the AABB Twitter Command Bunker. Such a great turnout ... thank you to everyone who participated! <https://t.co/2AGOWIUYxY>



HemoSonics @HemoSonics

2 hours ago

Half of blood #transfusions may be unnecessary - and costly! - according to a 2017 @TJCommission study: <https://t.co/TO5luSNCOZ> #Blooducation #AABBPEptalk



Theresa Malin @tmalinMLS

12 minutes ago

RT @KreuterMD: @TimHannonMD A lot has been done to ensure the blood inside the bag is very safe. However, transfusion safety occurs at the...



Maren Y. Fuller, MD @marenwhynd

6 minutes ago

RT @HermelinDaniela: !?What's the difference between **BLOOD** safety and TRANSFUSION safety? 🖱️ Check out this great educational cartoon by @...

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