

Whole Blood Panel

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THE UNIVERSITY OF KANSAS HEALTH SYSTEM



Stormont Vail
Health

Objectives

- Describe the use of whole blood for transfusion
- Discuss patient populations for utilization of whole blood
- Review potential risks of whole blood
- Evaluate financial implications of a whole blood program

Whole Blood Panel Discussion

- How did the conversation about implementation begin?
- Who were your facility champions?
- Was there any pushback?
- What were initial challenges/concerns?
- When did you go live?



Utilization

- What demographics receive LTOWB at your facility?
- What is included in your high-acuity Trauma cooler?



Utilization



5.27.2

If low-titer group O Whole Blood is used, the BB/TS shall have policies, processes, and procedures to define:

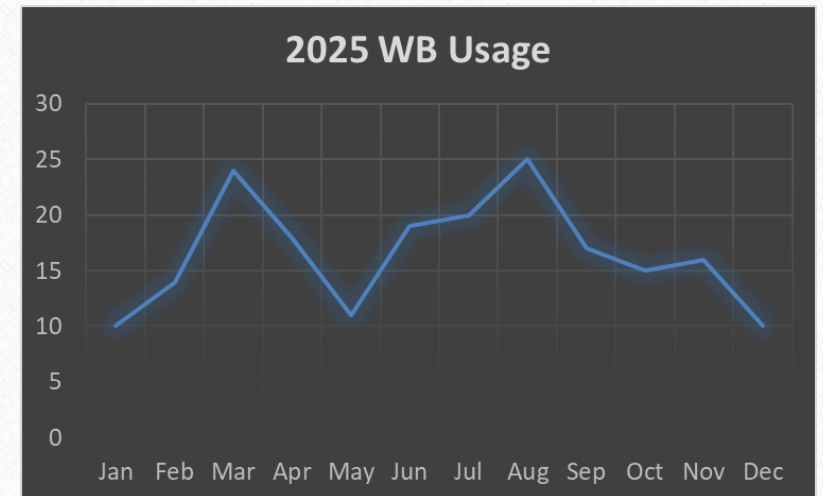
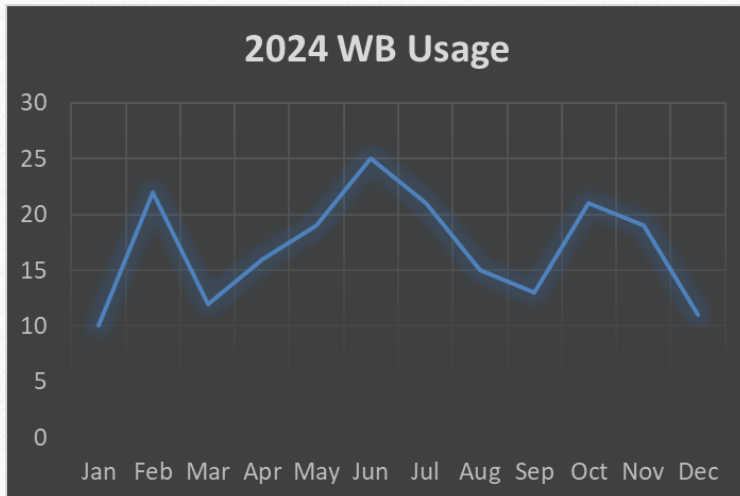
1. Low-titer threshold.
2. Use of low-titer group O Whole Blood.
3. Maximum volume/units allowed per event.

Standard 5.15.4 applies.

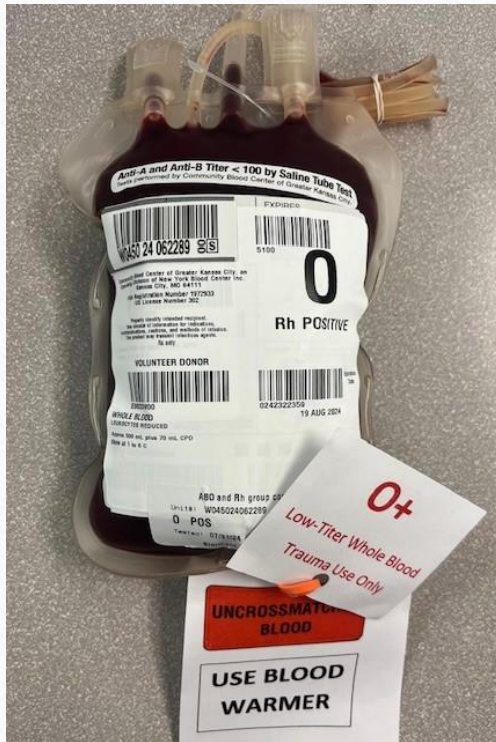
- What is your facility limit of whole blood units transfused to an unknown type? To a known Type O? To a known non-type O?

Utilization

- KU usage to date:
 - 2024 = 204
 - 2025 = 199



Utilization



- SVH usage to date:
 - 2024 = 26 (go-live in July)
 - 2025 = 60
 - 2026 = 23 through July

Wastage

- Do you struggle with whole blood outdating?
- Who assumes the financial burden of blood component wastage? Transfusion Service? Actual service line?





In The Headlines

THE NEW ENGLAND JOURNAL of MEDICINE

ORIGINAL ARTICLE

Prehospital Whole Blood in Traumatic Hemorrhage — a Randomized Controlled Trial

Jason E. Smith, M.D.,^{1,2} Rebecca Cardigan, Ph.D.,^{3,4} Emily Sanderson, M.Sc.,³
Laura Silsby, B.Sc.,³ Claire Rourke, M.Sc.,³ Ed B.G. Barnard, Ph.D.,^{1,5}
Peter Basham, B.Sc.,³ Grazia Antonacci, Ph.D.,⁶ Richard Charlewood, M.D.,⁷
Nikki Dallas,³ Jane Davies, M.Sc.,³ Elizabeth Goodwin, Ph.D.,⁸
Annie Hawton, Ph.D.,⁸ Cara Hudson, M.Sc.,³ Joanne Lucas, M.Sc.,³
Katie Keen, B.Sc.,³ Richard M. Lyon, M.D.,⁹ Brodie Nolan, M.D.,¹⁰
Gavin D. Perkins, D.Sc.,¹¹ Viona Rundell, B.Sc.,³ Laura Smith, M.Sc.,³
Simon J. Stanworth, Ph.D.,^{3,12} Anne Weaver, M.D.,^{13,14} Tom Woolley, M.D.,¹⁵
and Laura Green, M.D.,^{3,14,16} for the SWiFT Trial Group*



Partnerships with EMS



Future Plans

Receipt of RhD-positive whole blood for life-threatening bleeding in female children: A survey in alloimmunized mothers regarding minimum acceptable survival benefit relative to risk of maternal alloimmunization to anti-D

[Molly R. Sherwood](#) ✉, [Skye Clayton](#), [Christine M. Leeper](#), [Mark Yazer](#), [Kenneth J. Moise Jr.](#), [Marion E. Granger](#), [Philip C. Spinella](#)

It is time to reconsider the risks of transfusing RhD negative females of childbearing potential with RhD positive red blood cells in bleeding emergencies

[Mark H. Yazer](#) ✉, [Meghan Delaney](#), [Heidi Doughty](#), [Nancy M. Dunbar](#), [Arwa Z. Al-Riyami](#), [Darrell J. Triulzi](#), [Jon F. Watchko](#), [Erica M. Wood](#), [Vered Yahalom](#), [Stephen P. Emery](#)

Whole blood transfusion in the management of obstetric hemorrhage: A scoping review

[Justin Lalonde](#), [Pierre-Marc Dion](#), [Abigaël Carpentier](#), [Mikaëlle Chauret](#), [Mohamed S. Eissa](#), [Mark Walker](#), [Risa Shorr](#), [Johnathan Mack](#) ✉

Weighing the risk of hemolytic disease of the newborn versus the benefits of using of RhD-positive blood products in trauma

[Jennifer Andrews](#) ✉, [Cassandra D. Josephson](#), [Pampee Young](#), [Philip C. Spinella](#), [Mark H. Yazer](#)

Low titer Group O whole blood utilization in pediatric trauma resuscitation: A National Survey

[Dana Meshkin](#), [Mark H. Yazer](#), [Nancy M. Dunbar](#), [Philip C. Spinella](#), [Christine M. Leeper](#) ✉

QUESTIONS?

