


Name of Policy:	Maximum Surgical Blood Ordering Schedule	 Effective Date: 6/9/2008 Initial Effective Date: 1/2005
Policy Number:	3364-108-308	
Department:	Pathology/Laboratory – Blood Bank	
Approving Officer:	Associate Professor Director, Clinical Pathology/Hematopathology	
Responsible Agent:	Core Lab Coordinator (Michelle Bartkowiak, MT(ASCP)SBB) Manager, Lab (Cynthia O'Connell)	
Scope:	Pathology/Laboratory – Blood Bank	
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy		<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy

(A) Policy Statement

The Maximum Surgical Blood Ordering Schedule defines the number of units needed to meet the needs of at least 90% of patients undergoing a specific surgical procedure and or a procedure with a 10% or greater chance of requiring allogeneic blood. The schedule will be used to determine the number of units reserved for surgical patients. Surgeons or anesthesiologists may individualize specific requests and override the system to accommodate special needs.

(B) Purpose of Policy


The shelf life of a unit decreases each time a unit is held or crossmatched for a patient who does not use it. If more units than are required are put aside for a given surgery, then the unit is not available for another patient who may need the blood. Use of the schedule will allow better control of inventory and will be more cost effective, in that expense of unnecessary crossmatches will be avoided.

(C) Procedure

1. The surgery schedule for the next day will be examined prior to performing ordered crossmatches. Patient orders will be compared with the MSBOS and the recommendations of the MSBOS will take precedence over the orders received.
2. Orders may deviate from the MSBOS if specifically requested and justified by the attending surgeon or anesthesiologist.

(D) Definitions

1. T/S = Type and Screen. Perform ABO and Rh type. Screen for red cell antibodies. Recommended for procedures requiring less than 0.5 units of blood per patient per procedure or in which 90% or more of patients are not transfused.
2. C/T ratio= Crossmatch to Transfusion ratio. Ordinarily ≤ 2.0
3. SBO = Standard Blood Order Average number of units used for each procedure

Approved by:  _____ Robert L. Booth, Jr., M.D. Associate Professor Director, Clinical Pathology/Hematopathology Review/Revision Completed By: Michelle Bartkowiak, MT(ASCP)SBB	Review/Revision Date: 6/96 6/9/2008 7/96 2/99 8/00 11/03 1/05 1/2008 Next Review Date: 6/1/2011
Policies Superseded by This Policy:	

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.

Reference: AABB Technical Manual, current edition.

Maximum Surgical Blood Order Schedule - MSBOS

Procedure	Units
General Surgery	
• Antrectomy and vagotomy	2
• Breast biopsy	T/S
• Cholecystectomy	T/S
• Colon resection	2
• Exploratory Laparotomy	T/S
• Gastrectomy	2
• Hernia repair	T/S
• Ileal bypass	T/S
• Inguinal herniorrhaphy	T/S
• Laryngectomy	2
• Liver biopsy	T/S
• Mastectomy, radical	T/S
• Pancreatectomy	4
• Splenectomy	2
• Thyroidectomy	T/S
• Transmesenteric intrahepatic portosystemic shunt placement	4
• Vein stripping	T/S
• Whipple procedure-pancreaticoduodenectomy	4
Orthopedic	
• Arthroplasty	T/S
• Arthroscopy	T/S
• Bone graft-iliac	
• External fixation	
• Herniated disc	T/S
• Laminectomy	T/S
• Ligament repair	
• Open reduction	2
• Shoulder reconstruction	T/S
• Spinal fusion	3
• Total hip replacement	2-3
• Total knee replacement	T/S
Vascular	
• Aortic bypass with graft	4
• Endarterectomy	T/S
• Femoral-popliteal bypass with graft	2

OB-GYN	
• Abdomino-perineal repair	T/S
• Cesarean section	T/S
• D & C	T/S
• Hysterectomy abdominal/laparoscopic	T/S
• Hysterectomy, radical	2
• Laparoscopy	T/S
• Loop electrocautery excision procedure	
• Vaginal resuspension	T/S
Urology	
• Bladder, transurethral resection	T/S
• Cystourethroscopy	
• Nephrectomy, radical	1-3
• Radical prostatectomy, radical	1-2
• Prostatectomy, transurethral	T/S
• Renal transplant	T/S
Cardiothoracic	
• Aneurysm resection	6
• Redo coronary artery bypass graft	4
• Primary coronary artery bypass graft	2
• Lobectomy	T/S
• Lung biopsy	T/S
Oral	
• Tonsillectomy/adenoidectomy	0
• Mastoidectomy	
Neurosurgery	
• Aneurysm, Cranial	2
• Anterior cervical discectomy, with or without fusion	T/S
• Craniotomy	2
• Laminectomy, Cervical, Thoracic or Lumbar, for decompression	T/S
• Laminectomy for tumor	2
• Lumbar or cervical fusion, posterior	2
• Lumbar peritoneal shunt	T/S
• Stereotactic brain biopsy	NSR or T/S