


<p>Name of Policy: <u>Blood Utilization Review Committee</u></p> <p>Policy Number: 3364-87-08</p> <p>Approving Officer: Chief of Staff Medical Director</p> <p>Responsible Agent: Medical Director</p> <p>Scope: All University of Toledo Campuses</p>	 <p>Effective date: 03/14/01</p>
<input type="checkbox"/> New policy proposal	<input type="checkbox"/> Minor/technical revision of existing policy
<input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Reaffirmation of existing policy
<input type="checkbox"/>	<input type="checkbox"/>

(A) Policy statement

It is the policy of the University of Toledo Medical Center and its Medical Staff that appropriate review of utilization of blood and blood components will take place at least on a quarterly basis.

(B) Purpose of policy

To assign oversight of the blood utilization review process.

(C) Procedure

It shall be the responsibility of the Blood Utilization Review Committee to assure that the appropriate review of utilization of blood and blood components takes place at least on a quarterly basis. This review will be documented; and may be performed, as is appropriate, through a retrospective patient care evaluation mechanism, medical record review, or any other patient specific reviews. In addition, the committee shall review the investigation of actual or suspected infectious or noninfectious adverse events. The Committee shall review patient identification, specimen collection and labeling, blood administration practices and near-miss events. Finally, the Committee shall review the monthly and quarterly statistics on blood component usage, wastage and ordering practices. These data are systematically aggregated and analyzed on an ongoing basis with the focus on identifying opportunities for performance/process improvement, to evaluate the ability of the service to meet patient needs and to monitor compliance with peer review recommendations.

The Committee shall include a chairperson, secretary, blood bank representative, physician membership representative of the Hospitals Clinical Services with high blood component usage (anesthesiology, surgery, and medicine), the physician director of transfusion services, a nursing services representative, a quality management representative and a hospital administration representative.

The Blood Utilization Review Committee is a peer review committee as defined by section 2305.25 of the Ohio Revised Code. As such, the committee's proceedings and records are held in confidence.

<p>Approved by:</p> <hr/> <p>Christopher K. Lynn, M.D. Chief of Staff</p> <hr/> <p>Ronald McGinnis, M.D. Medical Director</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Blood Utilization Review Committee Medical Executive Committee</i></p>	<p>Policies Superseded by This Policy:</p> <ul style="list-style-type: none">• <i>MS-008 Blood Utilization Review Committee</i> <p>Review/Revision Date: 11/19/03 09/13/06</p> <p>Next review date: 09/13/09</p>
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