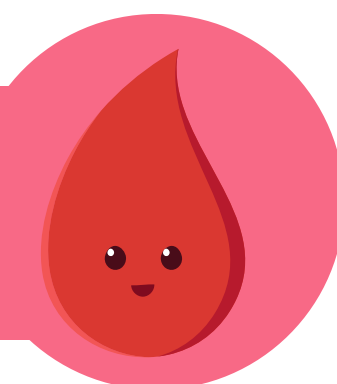


AUDIT : EVALUATION OF GROUP & SAVE INDICATIONS IN OBSTETRICS & GYNAECOLOGY.

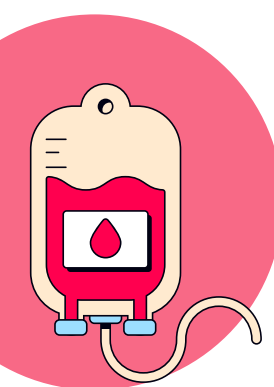


Background



- LTHTR blood transfusion guidelines provide a list of all procedures that require a Group and Save as part of the preoperative preparation.
- Some of the included procedures are minor day case procedures that are unlikely to require a blood transfusion
- A **single G&S** costs approximately **£28** including staff time and consumables.
- Many patients may need several G&Ss due to guidelines, errors or insufficient samples

Aim



- Determine frequency that blood transfusions are required in or following gynaecological procedures
- Identify procedures where a G&S could be safely removed from the standard pre-op workup
- Reduce hospital expenditure on this procedure while still maintaining patient safety

Method

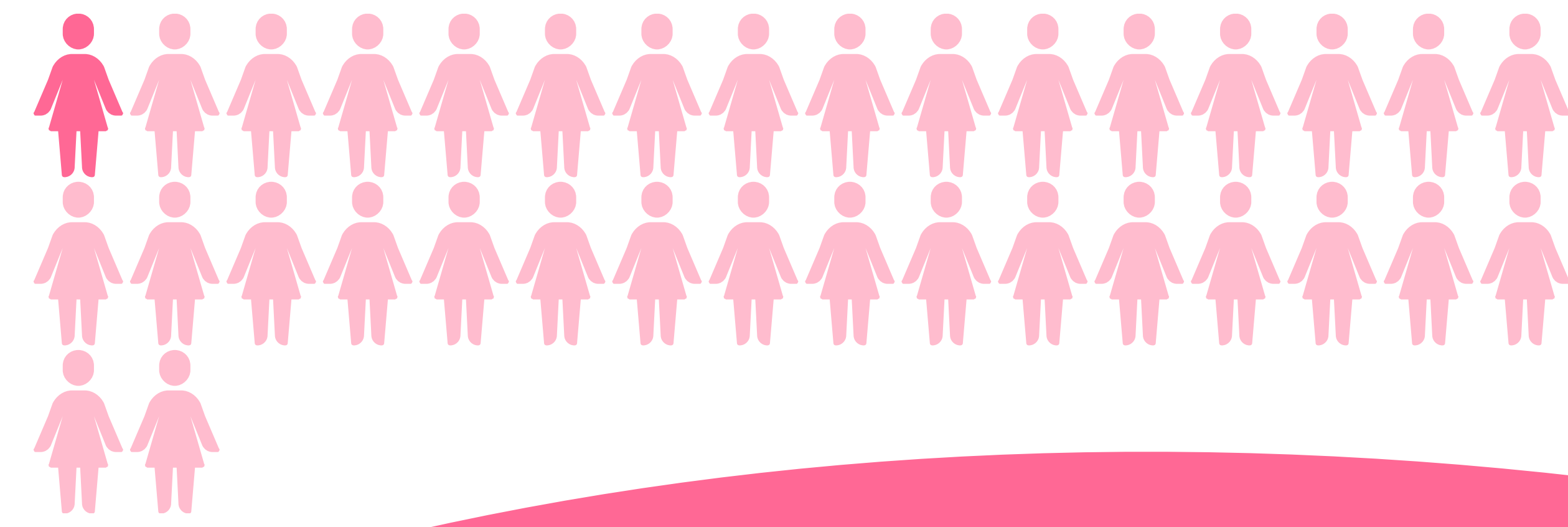


1. The audit team provided us with data : every patient who underwent a gynaecological procedure in the past 6 months and had a G&S
2. We then searched for each patient on the hospital system to determine if they had a blood transfusion, any transfusions that occurred outside of their visit to hospital for the surgery were excluded.
3. We then calculated the percentage that required blood transfusion for the whole cohort, as well as each individual surgical procedure.

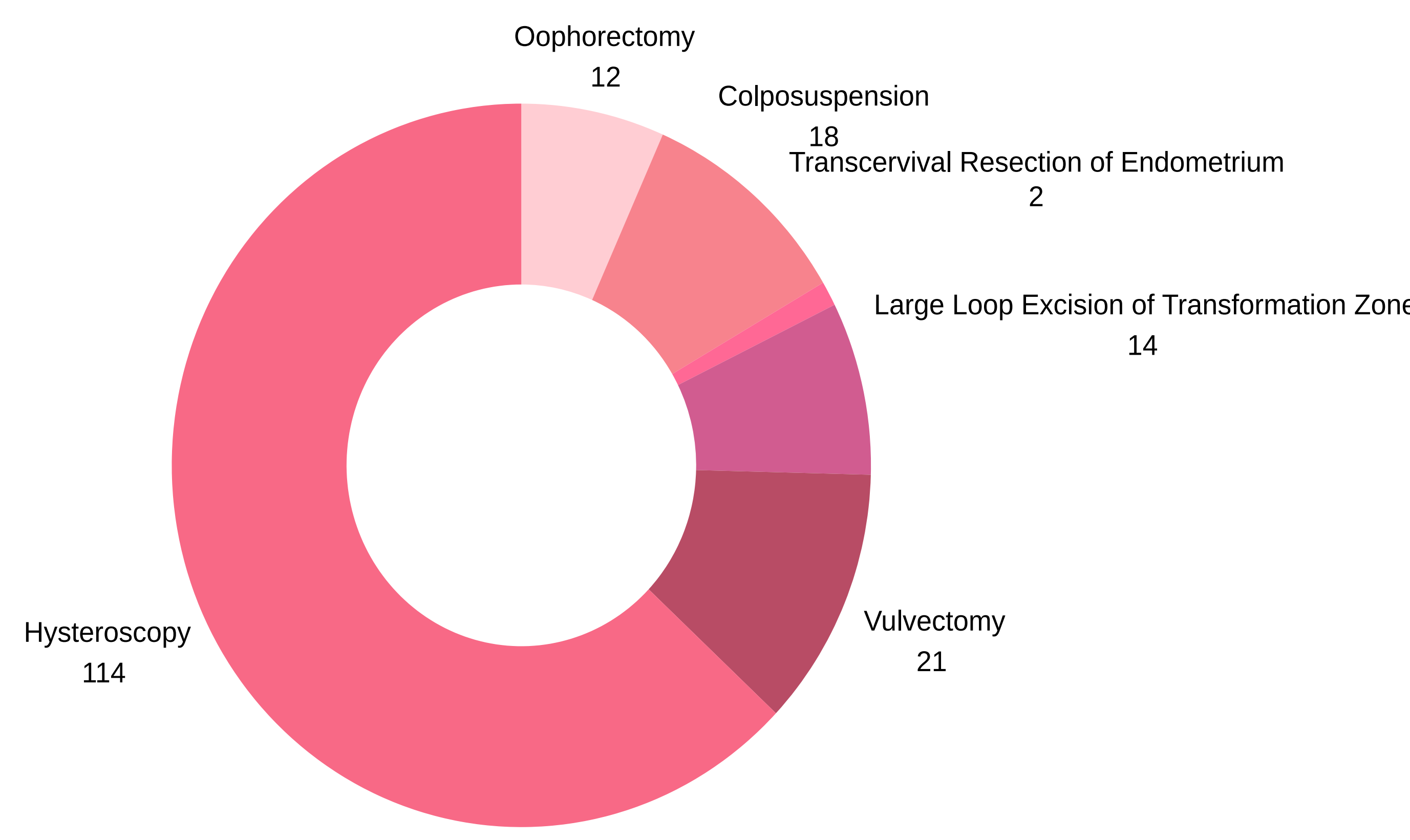
Results



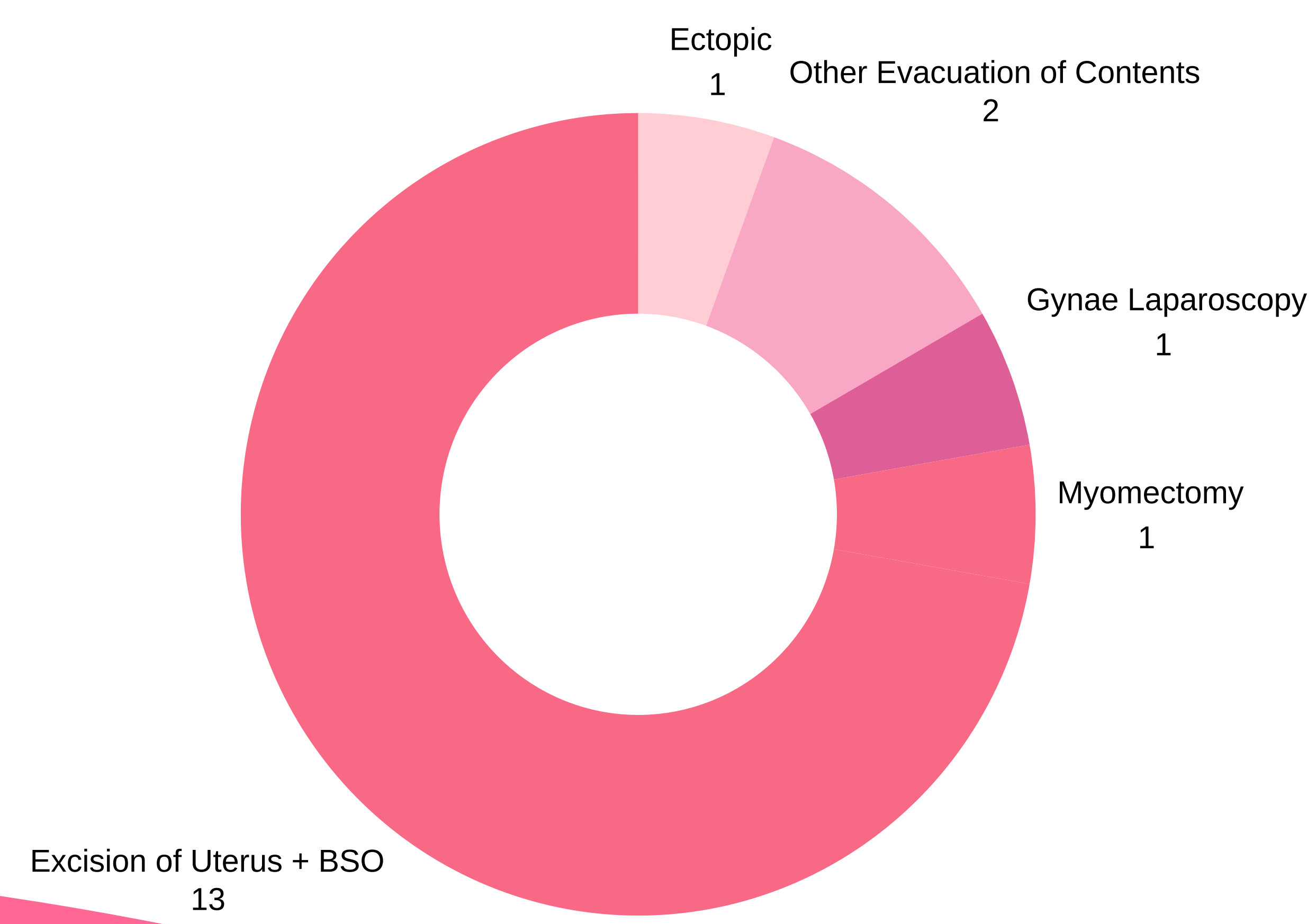
- **611** patients had gynae surgery + G&S
- **18** patients required a blood transfusion
- That is **2.9%** of the cohort and approximately **1 in every 34 people**



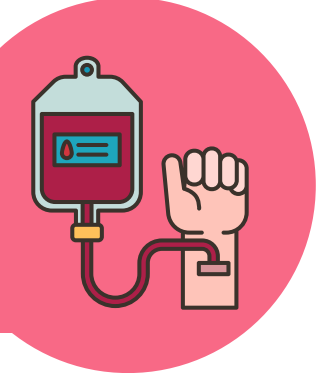
Procedures where a blood transfusion was NOT REQUIRED



Procedures that required a blood transfusion

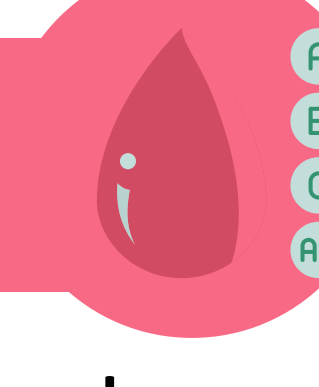


Conclusion



- The data shows that blood transfusions are rarely required for all the procedures they are mandated for
- Assuming each of these patients required 2 G+S bloods on average, we would be saving approximately **£10,136** every 6 months (**£20,272 a year**).

Recommendations



- Removing all the procedures which required no transfusions from the guidelines
- Re-audit in 6 months to determine if these changes have resulted in any incidents with patient care.

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