

Multidisciplinary Transfusion Education Decreases Avoidable Peripartum Blood Transfusion: Retrospective Observational Study

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Background

3 Year **Baseline** Investigation of
Transfusion Practice

**Multidisciplinary
Transfusion Education**

1 Year **Post-Impact** Investigation

Methods

Review of all RBC transfusions administered on L&D and postpartum units during
3 year period (2017- 2020) and 1 year period (2022)

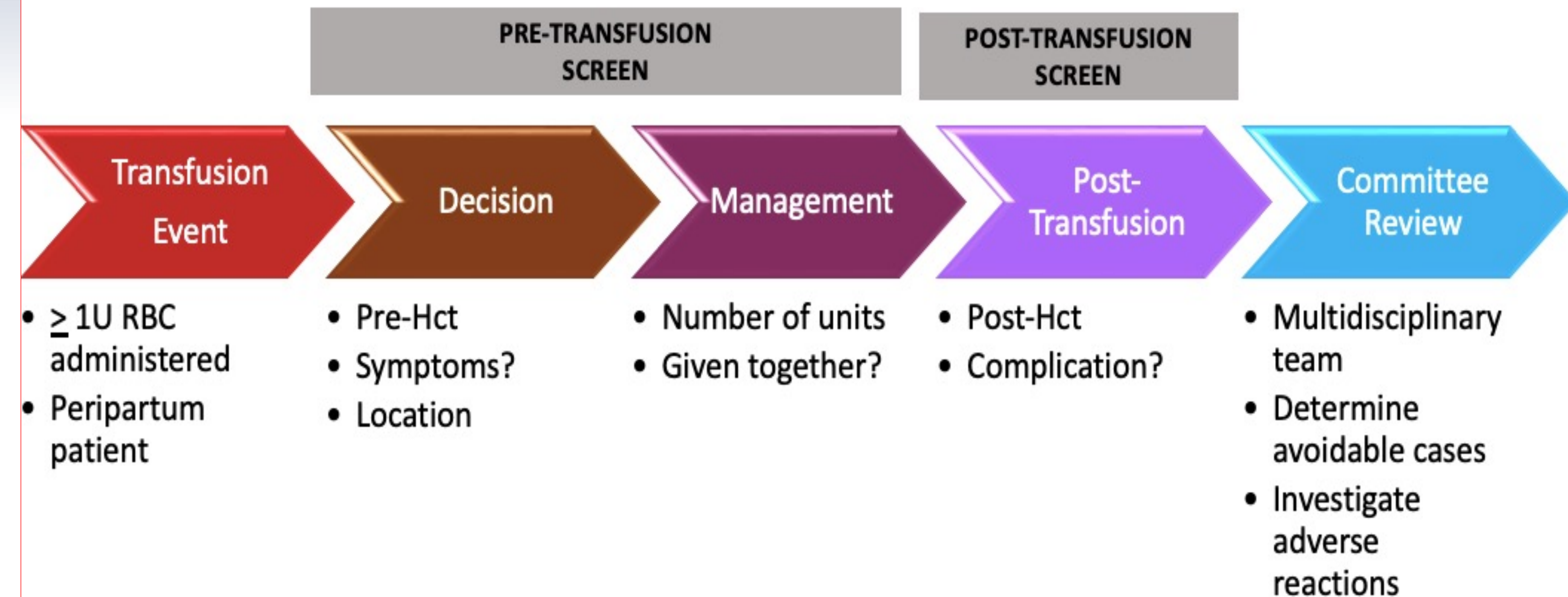


Fig 1: Review of all RBC transfusions administered on L&D and postpartum during 3 year period (2017-2020) and 1 year period (2022)

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Methods

- Pre- and post- transfusion criteria to assess decision management and volume administered (Fig. 2)
- Multidisciplinary Committee identified avoidable transfusions
- Results of baseline period led to focused lectures and hemorrhage protocols in a multidisciplinary approach
- **Primary outcome:** Reduction in avoidable transfusions after multidisciplinary transfusion education

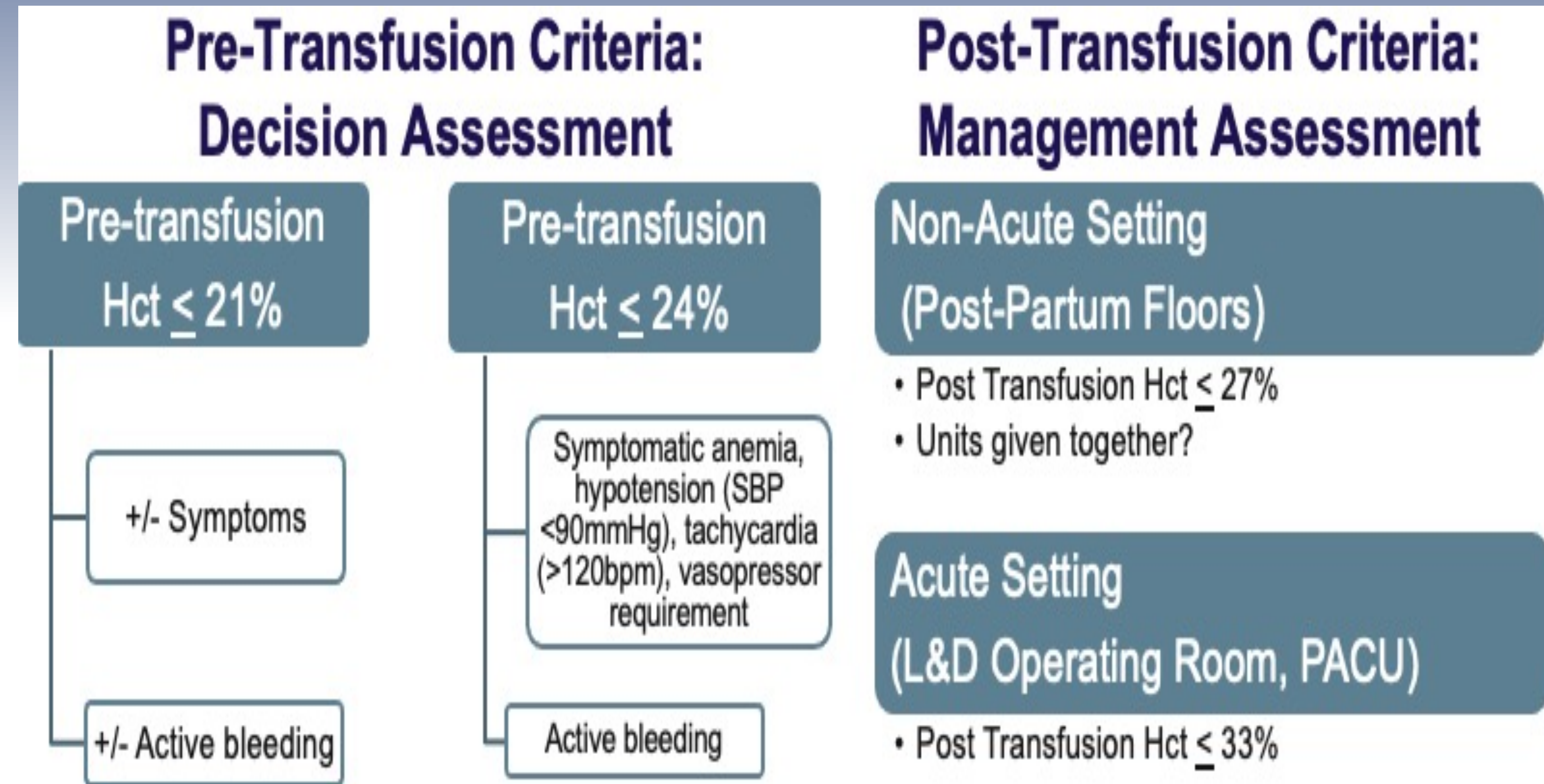


Figure 2: Avoidable Transfusion Criteria

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Figure 3: Results

	PRE (2017—2020)	POST (2022)	p - value
Total Transfusion Events (Postpartum and L&D)	294	136	-
Total Avoidable	73 (25%)	21 (15%)	0.03
Total Requiring Committee Review	163 (55%)	26 (20%)	< 0.001
Volume Inappropriate	45 (15%)	8 (5.8%)	0.006
Units Given Together on Postpartum (No Hct check between units)	113 (48%)	20 (14.7%)	< 0.001
Total Complications	11 (3.7%)	2 (1.5%)	0.24

Conclusion: **Multidisciplinary transfusion education decreased clinically avoidable transfusions.** Results revealed statistically significant decreases in overall avoidable transfusions, decreased events for committee review, and decreased practice of giving units together without Hct recheck.