
1. ORGANIZATION

1.0 Organization

The patient blood management program (hereinafter referred to as the program) shall have a structure that clearly defines and documents the parties responsible for the oversight and review of patient blood management (PBM) activities and the relationship of individuals responsible for key quality functions. This interdisciplinary program shall be patient-centered, evidence-based, data-driven, and outcomes-focused.

1.1 Executive Management

The program shall have a defined executive management structure. Executive management shall have:

- 1) The responsibility and authority for oversight and review of the program.
- 2) The authority to establish or change the program's quality system.
- 3) The responsibility for compliance with these *PBM Standards* and applicable laws and regulations.
- 4) The responsibility for collecting and reviewing of data on PBM including patient outcomes and program performance metrics.
- 5) The responsibility to identify stakeholders and to communicate results to these stakeholders.

1.1.1 Medical Director Qualifications and Responsibilities

The program shall have a medical director who is a licensed provider/physician and qualified by education, training, and/or experience.

1.1.1.1 The medical director's responsibilities shall include, but not be limited to:

- 1) Leadership and oversight on clinical issues.

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- 2) Consultative and support services on PBM matters that relate to the care and safety of patients.
- 3) Identification of program resources needed to conform to these *PBM Standards*.
- 4) Communication of program results and opportunities for improvement to executive management and hospital staff at least annually.



1.1.1.2 The medical director may delegate these responsibilities to another qualified individual(s); however, the medical director shall retain ultimate responsibility.

1.1.2 Executive management shall define the activities of the PBM program tied to patient outcomes.

1.1.2.1 A PBM program can be designated as a program activity level 1, 2, or 3 program. To be designated a specific activity level, the program shall be responsible for or have direct involvement with oversight and monitoring of the following activities:

Item	Responsibility	Activity Level 1	Activity Level 2	Activity Level 3
1	Evidence of institutional support for the PBM program at the hospital administration level	X	X	X
2	Metrics regarding transfusion appropriateness consistent with transfusion guidelines	X	X	X
3	Documentation of transfusion including patient consent, observation, adverse events, and outcomes	X	X	X
4	Budgeting to the level of care required by implementing these <i>PBM Standards</i>	X	X	X
5	Pretransfusion patient testing and evaluation	X	X	X
6	Patient- or case-specific assessment of potential blood usage	X	X	X
7	Preprocedure blood ordering including completion of type and antibody testing before procedure start time with a plan for antibody-positive patients	X	X	X
8	Preprocedure assessment and management of patient coagulation status	X	X	X
9	Monitoring of blood component waste and cause	X	X	X
10	Minimize blood loss due to laboratory testing (iatrogenic blood loss)	X	X	X
11	Process for managing the blood needs of unidentified patients and resolving their identification	X	X	X