Healthcare Organization Commitment

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Commitment Details

How many hospitals are represented in this commitment?

<table>
<thead>
<tr>
<th>Last Report</th>
<th>Current</th>
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<tbody>
<tr>
<td>100</td>
<td>100</td>
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Action Plan
The motivation for implementing Patient Blood Management is based on the finding of anemia, especially in the operative setting, representing a risk factor for increased odds of
in-hospital mortality as well as additional complications. All too frequently, patients already have insufficient blood volume when presenting for surgery. During hospitalization, intra- and postoperative blood losses as well as diagnostic blood losses from phlebotomy can further impair patient’s own blood volume. Commonly, and in many cases without considering alternatives, treatment is primarily realized based on transfusing allogenic red blood cells. Providing an optimal preoperative preparation as well as reducing blood losses during hospitalization are two prime goals of Patient Blood Management. Prior to surgery, patients are checked for anemia. In many cases anemia is caused by empty iron stores that impair a sufficient blood formation. If so, blood production can be amplified via iron supplementation, allowing patients to increase their blood volume by own efforts. Additional care is taken so that blood sparing techniques are used intra- as well as postoperatively. For instance, coagulation is optimized, and blood lost during surgery is salvaged, washed and retransfused. Whenever possible, smaller blood collection tubes are used to reduce the volume of phlebotomy related blood losses. Owing to technical advances, in many situations smaller blood collection tubes can be used to reduce phlebotomy related blood losses without impairing the quality of diagnostics. Consequently, blood remains where it is needed: Within the patient’s body! These measurements not only allow for a better patient recovery they also help to reduce the application of allogenic RBC and thereby to spare this valuable resource. If indicated Patient Blood Management supports the rational use of allogenic RBC. The number of PBM initiatives is growing worldwide. In Germany, PBM was initially implemented at the University Hospitals Frankfurt, Bonn, Kiel and Muenster. With the initiation of the German PBM Network many additional hospitals were inspired to likewise implement PBM. Currently, Patient Blood Management is evolving to a major quality indicator in German hospitals. The European and World PBM networks were founded to foster the implementation of Patient Blood Management on a global scale. Since 2011 the World Health Organization urges its member states to support the implementation of PBM. https://www.patientbloodmanagement.de/en/medical-rationale/ https://www.patientbloodmanagement.de/en/pbm-bundles/

Commitment Update
In 2017 the World PBM Network has been founded at the Summit. Since then one larger US Hospital chain and several European Hospitals have joined the PBM Network. These Hospitals share data and Knowledge to improve Patient Safety!

Other
Challenge 5 - Patient blood management

Please describe any best practices your organization has learned through your commitment and share valuable lessons or challenges that were overcome
Because the PBM program is shared across countries, more knowledge is collected to improve Patient Safety!
## Impact Details

<table>
<thead>
<tr>
<th>Initial Commitment</th>
<th>Commitment Update</th>
<th>Project Next Year</th>
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<tbody>
<tr>
<td>Lives Lost 375000</td>
<td>Lives Lost 10000</td>
<td>Lives Lost 9000</td>
</tr>
<tr>
<td>Lives Spared Harm Target 37500</td>
<td>Actual Lives Spared Harm in last 12 months 10000</td>
<td>Lives Spared Harm Target for following calendar year</td>
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<tr>
<td>Lives Saved Target 3750</td>
<td>Actual Lives Saved in last 12 months (might differ from initial target) 1000</td>
<td>Projected Target of Lives Saved for following calendar to try to finish commitment</td>
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<tr>
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<td>New Lives Lost (lives lost – actual lives saved) 9000</td>
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## Acknowledgement

Yes, I acknowledge that this commitment may be used for external communication and publicly announced at the World Patient Safety, Science & Technology Summit. Furthermore, I agree that this commitment may appear on the website of The Patient Safety Movement Foundation or the Masimo Foundation. I also give permission for my commitment to be used in support of the promotion of the World Patient Safety, Science & Technology Summit as well as The Patient Safety Movement initiative.