

# PATIENT BLOOD MANAGEMENT



**Erasmus+**

## 1) PREOPERATIVE DATA

Demographic		
	Institution	
	Patient number	
	Age	
	Sex	Male/Female
	Height (cm)	
	Weight (kg)	
	Body mass index (kg/m <sup>2</sup> )	
	Body surface area	
	First consultation date*	Day/month/year

\* Examination date of preoperative preparations, date after surgery decision.

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Laboratory Data	
Hemoglobin	g/dL
Hematocrit	%
MCV	fL
MCHC	g/dL
Reticulocyte	%
Thrombocyte count	10 <sup>9</sup> /L
PT	sec
aPTT	sec
INR	
Fibrinogen	mg/dL
Blood group	A Rh (-), A Rh (+), B Rh (-), B Rh (+), AB Rh (-), AB Rh (+), 0 Rh (-), 0 Rh (+)
AST	U/L
ALT	U/L
Total bilirubin	μmol/L
Albumin	gr/L
CRP	mg/L
Creatinine	mg/dL
Urea*	mg/dL
Glomerular filtration rate**	$eGFR_{cr} = 142 \times \min(Scr/\kappa, 1)^\alpha \times \max(Scr/\kappa, 1)^{-1.200} \times 0.9938^{\text{Age}} \times 1.012$ [if female] mL/min/1.73 m <sup>2</sup>
Potassium	mmol/L
Phosphorus	mmol/L
Calcium	mmol/L
Iron	μg/dL
Ferritin	mg/L
Iron binding capacity	μg/dL
Transferrin saturation	% (Iron/total iron binding capacity*100)
Folic acid	ng/mL
Vitamin B12	pg/mL
Fibrinogen	mg/dL

PT: Prothrombin time; aPTT: Activated partial thromboplastin time; INR: Internationalized normal ratio; AST: Aspartate transaminase; ALT: Alanine transaminase; CRP: C-reactive protein; \* Blood Urea Nitrogen may be preferred. Automated calculation is possible; \*\* There are several equations for GFR estimate. CKD-epi 2021 calculation is added to this form. Automated calculation is possible.

$eGFR_{cr} = 142 \times \min(Scr/\kappa, 1)^\alpha \times \max(Scr/\kappa, 1)^{-1.200} \times 0.9938^{\text{Age}} \times 1.012$  [if female]

where:

Scr= standardized serum creatinine in mg/dL  
 $\kappa= 0.7$  (females) or  $0.9$  (males)  
 $\alpha= -0.241$  (female) or  $-0.302$  (male)  
 $\min(Scr/\kappa, 1)$  is the minimum of  $Scr/\kappa$  or  $1.0$   
 $\max(Scr/\kappa, 1)$  is the maximum of  $Scr/\kappa$  or  $1.0$

<b>Medical History (Preoperative Risk Factors)</b>	
	Hypertension requiring treatment
	Diabetes mellitus
	LVEF
	Congestive heart failure
	NYHA Classification
	Hyperlipidemia
	Extra cardiac arteriopathy
	Neurological dysfunction
	CVA/TIAs
	Smoking
	COPD
	Chronic kidney disease*
	Hereditary coagulation disorders
	Thalassemia
	History of transfusion
	History of transfusion complication**
	EuroSCORE***

LVEF: Left ventricular ejection fraction; NYHA: New York Heart Association; CVA: Cerebro vascular accident; TIAs: Trancient ischemic attacks; COPD: Chronic obstructive pulmonary disease.

\* The Kidney Disease Outcomes Quality Initiative (KDOQI) of the National Kidney Foundation (NKF) classification. Automated selection is possible

\*\* Any complication related to transfusion

\*\*\* EuroSCORE or STS score can be preferred according to institution.

<b>Preoperative Medication</b>		
	ASA	Yes/No
	P2Y12 inhibitors	Yes/No/Stopped prior to surgery* 1. Ticagrelor 2. Clopidogrel 3. Prasugrel 4. Ticlopidin
	Using warren	Yes/No/Stopped prior to surgery* INR <2 before surgery Yes/No
	DOAC	Yes/No/Stopped prior to surgery* 1. Dabigatran 2. Rivaroxaban 3. Apixaban 4. Edoxaban
	LMWH	Yes/No/ Stopped prior to surgery*
	Andexanat alfa	Yes/No
	Idarucizumab	Yes/No

ASA: American Society of Anesthesiologists; DOAC: Directly acting oral anticoagulants; LMWH: Low-molecular-weight heparin.

\*This defines recommended duration of drug cessation before surgery or more. Ex. 3≤ days for ticagrelor 5≤ days for clopidogrel

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## 2) RISK FACTORS

<b>Evaluation of Bleeding Risk</b>			
<b>The Papworth Bleeding Risk Stratification Score</b>		<b>Value 0</b>	<b>Value 1</b>
Surgery priority		Elective	Urgent or emergency
Surgery type		CABG or single valve	All other surgery types
Aortic valve disease		None	Stenosis, regurgitation or both
BMI (kg/m <sup>2</sup> )		BMI ≥25	<25
Age (year)		<75	≤75

CABG: Coronary artery bypass graft; BMI: Body mass index.

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<b>Evaluation of Transfusion Risk</b>			
		<b>Transfusion Risk (ACTA-Port)</b>	<b>Point</b>
Age (year)	>70		1
	≤70		0
Sex	Female		1
	Male		0
Hb (g/dL)	• <11		9
	• 11		8
	• 12		6
	• 13		3
	• 14		2
	• ≤15		0
	• CABG valve		2
Type of operation	• Combination		5
	• Other		0
	• <1		0
EuroSCORE II	• 1		2
	• 2		3
	• 3		4
	• ≤9		5
	• <88		0
Creatinine (μmol/L)	• 88		1
	• 177		3
	• <1.7		6
BSA (m <sup>2</sup> )	• 1.7		4
	• 1,9		2
	• 2,1		1
	• ≤2.3		0
	Total		0-30
Estimated risk of perioperative blood transfusion*			
Median units of blood transfused according to score**			
		• 0-14	0 Unit
		• 15-19	1 Unit
		• 20-24	2 Unit
		• 25-30	3 Unit

CABG: Coronary artery bypass graft.

\* Automated Risk Calculation is possible

\*\* The score was not designed to predict number of units of blood transfused. However, increasing ACTA-PORT score was associated with increased number of units of blood transfused perioperatively: risk score 0-14, median units of blood transfused 0; score 15-19, median 1 unit; score 20-24, median 2 units; and score 25-30, median 3 units.

<b>Preoperative Evaluation</b>	
Operation date	Day/month/year
Duration between 1 <sup>st</sup> examination and surgery	Days
<b>Preoperative Laboratory Results</b>	
1 Hemoglobin	g/dL
2 Hematocrit	%
3 MCV	fL
4 MCHC	g/dL
5 Reticulocyte	%
6 Thrombocyte count	10 <sup>9</sup> /L
7 PT	sec
8 aPTT	sec
9 INR	
10 Fibrinogen	mg/dL
11 Blood group	A Rh(−), A Rh(+), B Rh(+), B Rh(+), AB Rh(−), AB Rh(+), 0 Rh(−), 0 Rh(+)
12 AST	U/L
13 ALT	U/L
14 Total bilirubin	µmol/L
15 Albumin	g/L
16 CRP	mg/L
17 Creatinine	mg/dL
18 Urea	mg/dL
19 Glomerular filtration rate	$eGFR_{cr} = 142 \times \min(Scr/\kappa, 1)^\alpha \times \max(Scr/\kappa, 1)^{-1.200} \times 0.9938^{\text{Age}} \times 1.012$ [if female] mL/min/1.73 m <sup>2</sup>
20 Potassium	mmol/L
21 Phosphorus	mmol/L
22 Calcium	mmol/L
23 Iron	µg/dL
24 Ferritin	mg/L
25 Iron binding capacity	µg/dL
26 Transferrin saturation	%
27 Folic acid	ng/mL
28 Vitamin B12	pg/mL
29 Fibrinogen	mg/dL

PT: Prothrombin time; aPTT: Activated partial thromboplastin time; AST: Aspartate transaminase; ALT: Alanine transaminase; CRP: C-reactive protein.

Anemia/Iron Deficiency Treatment		
	Preoperative iron supplementation	Yes/No 1. IV <ul style="list-style-type: none"><li>• Ferric carboxymaltose</li><li>• Iron sucrose</li></ul> 2. Oral
	Dose of IV iron supplementation	.....mg
	Preoperative folic acid supplementation	Yes/No
	Postoperative folic acid supplementation	Yes/No
	Duration between surgery and IV iron supplementation	Days
	Erythropoietin	Yes/No
	Preoperative blood transfusion	Yes/No .....Units

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### 3) OPERATIVE DATA

Autologous blood donation*	Yes/No .....Units
Acute normovolemic hemodilution	Yes/No .....mL
Antifibrinolytic	Yes/No
Type of fibrinolytic**	<ol style="list-style-type: none"> <li>1. Aprotinin</li> <li>2. TxA</li> <li>3. EACA low dose</li> <li>4. Medium dose</li> <li>5. High dose bolus and maintenance</li> <li>6. Postoperative bolus</li> </ol>
Antegrade or retrograde autologous priming	Yes/No
Amount of AAP/RAP	.....mL
Ultrafiltration	Yes/No .....mL
Anticoagulation type	<ol style="list-style-type: none"> <li>1. Heparin</li> <li>2. Bivalirudin</li> </ol>
Heparin dosage (initial bolus)	<ol style="list-style-type: none"> <li>1. 150 U/kg</li> <li>2. 300 U/kg</li> <li>3. 400 U/kg</li> </ol>
Total heparin (bolus+prime+maintenance)	Units
Antithrombin III concentrate replacement to increase ACT	Yes/No
FFP replacement to increase ACT	Yes/No .....Units
Protamine	.....Units
Protamine/heparin ratio	Automated calculation
Type of operation	<ol style="list-style-type: none"> <li>1. CABG</li> <li>2. Valve</li> <li>3. Combination</li> <li>4. Aort</li> </ol>
Redo case	Yes/No
Timing of surgery	<ol style="list-style-type: none"> <li>1. Elective</li> <li>2. Urgent</li> <li>3. Emergency</li> <li>4. Salvage</li> </ol>
Off-pump surgery	Yes/No
Prime volume	mL
Residual prime***	mL
CPB time	sec
Cross clamp time	sec
Minimum temperature	°C

Type of cardioplegia	<ol style="list-style-type: none"> <li>1. Blood</li> <li>2. Crystalloid</li> <li>3. Histidine-tryptophan-ketoglutarate (HTK)</li> <li>4. Del Nido</li> </ol>
Route of cardioplegia	<ol style="list-style-type: none"> <li>1. Antegrade</li> <li>2. Retrograde</li> <li>3. Antegrade + retrograde</li> </ol>
Amount of cardioplegia	mL
MIECC	Yes/No
Cell saver?	Yes/No
Amount of transfusion	.....mL
Circulatory arrest	<p>Yes/No</p> <ol style="list-style-type: none"> <li>1. Circulatory arrest</li> <li>2. Retrograde perfusion</li> <li>3. Antegrade selective cerebral perfusion</li> </ol> <p>Hypothermia during arrest</p> <p>Yes/No</p> <ol style="list-style-type: none"> <li>1. Moderate</li> <li>2. Deep</li> </ol>
RBC transfusion during CPB	
Topical hemostatic agent usage	<p>Yes/No</p> <p>.....Units</p>
Topical hemostatic agent usage	Yes/No

TxA: Tranexamic acid; EACA: Epsilon-aminocaproic acid; FFP: Fresh frozen plasma; ACT: Active coagulation time; CABG: Coronary artery bypass graft; CPB: Cardiopulmonary bypass; MIECC: Minimal invasive extracorporeal circulation; RBC: Red blood cell.

\* Autologous donations (self donation) are blood donations that patient give for their own use.

\*\* Transamine dosage varies between clinics researchers can modify this section.

\*\*\* Prime volume-AAP/RAP volume.

## 4) POSTOPERATIVE DATA

<b>Postoperative Early Period ICU Follow-up</b>	
Total drainage in 12 hours	mL
Hemorrhage more than 1000 mL	Yes/No
Tamponade	Yes/No
Cardiac arrest related to hemorrhage	Yes/No
Reexploration due to hemorrhage	Yes/No
Location of reexploration	1. ICU 2. Operating room
Timing of reexploration	1. ≤6 hours 2. 6-12 hours 3. 12< hours
Possible cause of hemorrhage	1. Surgical 2. Coagulopathy
If coagulopathy is considered treatment is guided with viscoelastic tests (VET)?	Yes/No
Which VET is performed?	1. TEG 2. ROTEM
Treshold Hb or RBC transfusion	1. <7 g/dL 2. <8 g/dL 3. <10 g/dL
Total RBC transfused (Perioperative all transfusions)	.....Units
Total FFP transfused	.....Units
Total cryoprecipitate transfused	.....Units
Total thrombocyte transfused	.....Units
DIC	No Hemorrhage developed Thrombosis developed
Fibrinogen replacement	Yes/No .....units
PCC replacement	Yes/No .....units
Factor 13 replacement	Yes/No
Recombinant Factor 7a replacement	Yes/No
Desmopressin	Yes/No

ICU: Intensive care unit; TEG: Thromboelastography; ROTEM: Rotational thromboelastometry; RBC: Red blood cell; FFP: Fresh frozen plasma; DIC: Disseminated intravascular coagulation.

<b>Transfusion Related Complications</b>	
Acute hemolytic	Yes/No
Late hemolytic	Yes/No
Transfusion related acute lung injury (TRALI)	Yes/No
Transfusion associated dyspnea (TAD)	Yes/No
Transfusion associated circulatory overload (TACO)	Yes/No
Acute urticaria	Yes/No
Anaphylaxis/anaphylatoid reaction	Yes/No
Post transfusion purpura	Yes/No
Nonhemolytic febrile transfusion reaction (NHFTR)	Yes/No
Transfusion associated graft versus host disease	Yes/No
Embolism	Yes/No
Sepsis	Yes/No
Transfusion transmitted diseases	Yes/No

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<b>Postoperative Late Follow-up</b>	
Arrhythmia	None AV block New onset AF Atrial flutter SVT VT VF
Postoperative highest creatinine	mg/dL
Acute kidney injury	Stage 1 Stage 2 Stage 3
Dialysis	Yes/No
Mechanic ventilation duration	.....hours
Entubation longer than 24 hours	Yes/No
Pulmonary complications	None Atelectasis Pneumonia ARDS Pulmonary effusion Pulmonary edema
NIMV	Yes/No
Reintubation	Yes/No
Surgical wound infection until discharge	None Superficial infection Deep infection
Surgical wound infection after discharge	None Superficial infection Deep infection
Sternal dehiscence detected until discharge	Yes/No
Mediastinitis	Yes/No
Cerebrovascular event	Yes/No
Type of CVA? 1. Hemorrhagic 2. Ischemic 3. Hypoxic sequela 4. Sequela	Yes No
Seizure	Yes/No
Gastrointestinal complication	Yes/No
Septicemia proven with positive blood cultures	Yes/No
Septic shock	Yes/No
Type 5 MI	Yes/No
Cardiac arrest not related with hemorrhage	Yes/No

NIMV: Non invasive mechanic ventilation; CVA: Cerebrovascular accident; MI: Myocardial infaction.