User Guide

Canadian Blood Services Hospital Portal

2021-02-02

Public (P)



Revision History

Version	Date	Author/ Change Made By	Description
1.0	2020-11-03	Lisa Hughes	Initial Document
2.0	2021-02-02	Lisa Hughes	Updates to include new functionality for Reporting & Analytics and Targets and Recurring Orders

Table of Contents

1. Overview	5
2. Hospital Portal Access & Setup	5
2.1 System Requirements	5
2.2 Initial Access	6
2.3 Forgot Password	11
2.4 Login	15
2.5 Logout	15
2.6 Set Active Hospital	16
2.7 Support	16
3. Hospital Administration	17
3.1 New User Setup	17
3.2 Setting up a user at multiple sites	19
3.3 Removing a user from your hospital	19
4. BloodCounts Application	19
4.1 Submission Frequency	19
4.2 Required Fields	20
4.3 Submitting Hospital Inventory	20

4.4 Submitting Hospital Disposition	22
4.5 Submitting Using Blood Wisely Information	26
4.6 Locating & Editing a Previous Submission	28
4.7 Printing Submissions	30
4.8 Changes in Data Entry Requirements from Previous System	31
5. Reporting & Analytics	32
6. Targets and Recurring Orders	34
7. APPENDIX A – Data Entry Field Definitions (BloodCounts Application)	35
7.1 Disposition	35
7.2 Using Blood Wisely	43



1. Overview

Canadian Blood Services (CBS) Hospital Portal ("Hospital Portal") is a web-based portal developed by CBS for all digital hospital interactions and communications in the area of transfusion medicine. Digital interactions currently include:

- BloodCounts (formerly known as The Blood Component and Product Disposition System): An application to allow hospitals to share information about
 - Hospital inventory levels for blood components and PPP products This information is used for Average Daily Red Cell Demand and Inventory Index calculations and for contingency planning
 - Hospital disposition of blood components and PPP products, including solvent/detergent treated plasma
 - o Other transfusion practices such as Using Blood Wisely

Additional digital capabilities such as online ordering will be added to the Hospital Portal in the future.

2. Hospital Portal Access & Setup

2.1 System Requirements

An internet connection with a web browser. We recommend using Google Chrome or Microsoft Edge.

You will need to ensure your hospital IT department does not block the URLs associated with the application. Please contact your network administrator to make sure they allow the following URLs.

- https://myhospital.blood.ca
- https://cbsfusion.b2clogin.com
- https://rest-admin-fusion.blood.ca
- <u>https://rest-disposition-fusion.blood.ca</u>



2.2 Initial Access

NOTE: Before following the steps below your Hospital or CBS Administrator must have created your account.

1. Open your email account associated with your user account and open the registration email. Click Register.





- <image>
- 2. Enter your email address and click the Send verification code button.

3. Open your email account associated with your user account and open the verification code email from Microsoft on behalf of Canadian Blood Services.

Canadian Blood Services accou	nt email verification code Inbox ×			ē	ß
Microsoft on behalf of Canadian Blood Services to me +	<msonlineservicesteam@microsoftonline.com></msonlineservicesteam@microsoftonline.com>	12:20 PM (0 minutes ago)	☆	4	:
	Verify your email address				
	Thanks for verifying your <u>lisah.cbs@gmail.com</u> account! Your code is: 967145				
	Sincerely, Canadian Blood Services				





4. Enter the verification code and click Verify code.

5. Enter your new password and confirm new password. Click Create.



NOTE: The password must have at least 3 of the following: a lowercase letter, an uppercase letter, a digit, a symbol.



6. Click Sign in.





7. Read the User access agreement and check the box.

NOTE: This is only required at initial sign up or if there is a change to the User access agreement.

User access agreement

Canadian Blood Services The Hospital Portal

Canadian Blood Services (CBS) Hospital Portal ("Hospital Portal") is a web-based business application that manages digital interactions, transactions and communications between Canadian Blood Services and Canadian health organizations that facilitate the practices and programs in transfusion medicine. This user access agreement governs your access to and use of Hospital Portal. By accessing Hospital Portal, you are agreeing to:

- Create your account using your real name and accurate, complete information.
- Maintain the confidentiality of your username and password. Your account is for your use only and access is not to be shared, transferred or assigned to anyone else. Individuals who require access to Hospital Portal must request their own username and password.
- · Complete your organization's privacy training as a condition of accessing this portal.
- Comply with any and all policies, procedures or guidelines respecting the privacy, confidentiality and security of information and the use of electronic devices at the facility you are employed with or otherwise engaged.
- Maintain the privacy and confidentiality of information contained in Hospital Portal and only access, use or disclose the information as necessary for the performance of your duties, or as authorized by Canadian Blood Services.
- Immediately notify Canadian Blood Services of any breach of privacy, confidentiality or security involving Hospital Portal or of any suspected unauthorized use of your account to myhospital@blood.ca.
- Advise Canadian Blood Services at myhospital@blood.ca if you no longer require access to Hospital Portal. Inactive accounts will be deactivated by Canadian Blood Services after 365 days.

Hospital Portal is subject to monitoring for purposes such as auditing, quality assurance, system performance, appropriate user access and use, and to maintain system integrity and security. Unauthorized or inappropriate use of Hospital Portal may result in revocation of access and other penalties under law. Canadian Blood Services may terminate your access to Hospital Portal at any time.

By checking this box, you confirm you have read, understand and accept the terms outlined above.

8. You now have access.



2.3 Forgot Password

1. If you forget your password. Click the Forgot your password link.



2. Enter your email address and click Send verification code.





3. Open your email account associated with your user account and open the verification code email from Microsoft on behalf of Canadian Blood Services.



4. Enter the verification code and click Verify code.





5. Click Continue.



6. Enter your new password confirm new password. Click Continue.





7. Click Sign in.





2.4 Login

NOTE: We recommend using either Google Chrome or Microsoft Edge as your browser to log in.

1. Type <u>https://myhospital.blood.ca</u> in the address bar.

NOTE: you can save this address as a favourite for easy access later.

2. If not already completed, enter your email address and password. Click Sign in.



2.5 Logout

NOTE: You are requested to log out after each use. The system will automatically log you out after 90 minutes of inactivity.

1. Click the down arrow. Click Log out.

Canadian Blood Services	The Ottawa Hospital- Civic Campus	Lisa Test Hughe : • Lisa Test Hughes
BloodCounts	The Ottawa Hospital- Civic Campus Submissions	Edit Profile
+ Disposition	+ Create - T Filters >	The Ottawa Hospital- Civic Campus
+ Inventory		Log Out
+ Using Blood Wisely	Show per page 10 50 100 150	
	Showing 1 to 10 of 23 entries	< Previous 1 2 3 Next >



2.6 Set Active Hospital

- 1. Click the down arrow. Your current active hospital is indicated by a green radio button.
- 2. Click the radio button of the hospital you want to be your new active hospital.

Canadian Blood Services	Hospital Portal	Lisa (Hosp User) Hughes The Ottawa Hospital- Civic Campus ▼
BloodCounts	The Ottawa Hospital- Civic Campus Submissions	Lisa (Hosp User) Hughes
+ Disposition	+ Create • T Filters •	The Ottawa Hospital- Civic Campus
+ Inventory	Show per page 10 50 100 150	The Ottawa Hospital - Riverside Campus
+ Using Blood Wisely	Showing 1 to 10 of 53 entries < Previous 1	2 Log Out

3. The active hospital is updated

Canadian Blood Services	Hospital Portal	Lisa (Hosp User) Hughes The Ottawa Hospital - Riverside Campus ▼
BloodCounts	The Ottawa Hospital - Riverside Campus Submissions	
+ Disposition	+ Create • Y Filters •	
+ Inventory	Show per page 10 50 100 150	
+ Using Blood Wisely		

2.7 Support

Direct all inquiries to a Hospital Liaison Specialist. Hospital Liaison Specialist contact information can be found at <u>www.blood.ca</u> in the Hospital section.



3. Hospital Administration

3.1 New User Setup

NOTE: If a user already (identified by duplicate email address) exists in the system, you will get a prompt to let you know.

1. Click on User List from the Manage menu.

Canadian Blood Services	Hospital Portal The Ottawa Hospital- Civic Campus	Lisa External Hughes -
	The Ottawa Hospital- Civic Campus Submissions	
BloodCounts	+ Create • T Filters •	
+ Disposition		
+ Inventory	Show per page 10 50 100 150	
+ Using Blood Wisely	Showing 1 to 10 of 34 entries < Previous 1 2	. 3 4 Next >
List	# • Category • Type • Date Submitted • Submitted By • Date Submitted • Submitted By • Oate Submitted • Submitted By • Oate Submitted • Submitted By • Oate Submitted • Oa	

2. A list of all users for your hospital is displayed. Click Create User.

The Ottawa Hospital- Civic Campus Users						
+ Create User T Filters	ξ.					
Show per page 10 50 100	150					
Showing 1 to 10 of 11 entries			< Prev	vious 1 2 Next >		
First Name Last Name	Email		Current Hospital	¢ Action [‡]		
Scott Gorny	scott.gorny@blood.ca	Yes	The Ottawa Hospital- Civic Campu	s Delete		
Rob External Romans	robert.romans@sympatico.ca	Yes	The Ottawa Hospital- Civic Campu	s Delete		
Susan White External	susan_white@bell.net	Yes	The Ottawa Hospital- Civic Campu	s Delete		
Bridget External Carey	bridget@nitabeer.com	Yes	Kootenay Lake Hospital	Delete		
Lisa Internal Hughes	lisa.huqhes@blood.ca	Yes	The Ottawa Hospital- Civic Campu	S Delete		



3. Enter First Name, Last Name and Email address. When you've completed your entry click Submit.

Last Name:	
	SUBMIT ->
	Last Name:

4. A registration email will be sent to the user's email address.

NOTE: The user will need to complete the registration process to obtain access.

5. To view user accounts, click on Filters. You can filter any combination of First Name, Last name and Username/Email. Click Apply Filter and a list of all user accounts that match will be displayed.

6. Click on the user account to open.

First Name	 Last Name 	Email	Account Enabled	♦ Current Hospital	\$	Action
Lisa Test	Hughes	lhughes.cbs@gmail.com	Yes	The Ottawa Hospital- Civic Campus		Delete
Showing 1 to 1	of 1 entries			< Prev	ous	1 Next >



7. View or make edits as required and click Submit to save any changes.

First Name:	Last Name:	
Lisa Test	Hughes	
Email: Ihughes.cbs@gmail.com	Enabled: Roles:	Yes Hospital User
	Active Hospital:	The Ottawa Hospital- Civic Campus
Cancel 3		SUBMIT ->

3.2 Setting up a user at multiple sites

As a Hospital Admin you are only able to add a new user to your current Active Hospital. If the user also works at another site that you manage, you can toggle your Active Hospital and proceed to create the user in that site as well. The user will only receive one registration email as the system will recognize they already exist.

3.3 Removing a user from your hospital

Details about removing a user from your hospital will be included in a Version update of this User Guide when the functionality is available.

If you have a user that needs to be removed from your hospital prior to this functionality being available, please contact your Hospital Liaison Specialist who will be able to help you.

4. BloodCounts Application

4.1 Submission Frequency

Disposition: Hospitals are requested to submit disposition data (for the previous month) for all blood components and plasma protein products by the 10th working day of each month.

Inventory: Hospitals are encouraged to provide inventory data for blood components daily (7 days/week). Should inventory challenges be experienced, hospitals may be requested by the National Emergency Blood Management Committee to provide inventory data on a more frequent basis and within a specific timeframe.



Hospitals are now able to provide PPP inventory data. Hospitals are encouraged to provide inventory data for PPP daily (7 days/week). Should inventory challenges be experienced, hospitals may be requested by the National Emergency Blood Management Committee to provide inventory data on a more frequent basis and within a specific timeframe.

Using Blood Wisely: Participating hospitals are requested to submit Using Blood Wisely data (for the audit period).

4.2 Required Fields

For both Disposition and Inventory submissions the Product Category(s) must be selected to make a submission.

The Reporting Month for the previous month will display by default for Disposition submissions. If the submission is for a different month click on the calendar icon to choose the correct month.

The Reporting Month field must be manually selected for Using Blood Wisely submissions.

4.3 Submitting Hospital Inventory

- 1. Ensure hospital name is accurate for the inventory submission you are going to provide and if not switch hospitals.
- 2. From the BloodCounts menu click on Inventory.

Canadian Blood Services	Hospital Portal The Ottawa Hospital- Civic Campus		Lisa Ext	ernal Hughes *
C	The Ottawa Hospital- Civic Campus Submissions			
BloodCounts	+ Create • T Filters >			
+ Disposition + Inventory	Show per page 10 50 100 150			
+ Using Blood Wisely	Showing 1 to 10 of 34 entries < Previous 1	2 3	4	Next >

3. Click to select the blood components/products being reported.

Red Blood Cell	0	Hospital Name:	The Ottawa Hospital- Civic Campus	
Platelets	0	Date Submitted:	2020-10-07 11:31 EDT	
Plasma Protein Products	0	Submitted By:	Lisa External Hughes	
Plasma	0	Data Edited:		



4. Each blood component/product selected is displayed. Click the category you want to enter data for, and the table will open.

	 Ded Black Online
2	Red Blood Cells
	 Red Blood Cells (Autologous)
	 Red Blood Cells (Directed)
P	latelets
	 Pooled Platelets

5. Enter the number of units available in each field as appropriate. Use Tab to move between fields. The Total field is automatically calculated.

NOTE: There is no need to enter zeros. Only enter non-zero quantities.

▼ Red	Blood Cells
Туре	Inventory Level
0+	121
0-	50
A+	80
A-	35
В+	
B-	
AB+	
AB-	
Total:	286



6. When you have completed your entry for all products click Submit.

NOTE: An inventory report can be edited if an error is discovered after submission.

ed Bl	Blo	00	00	00	0	d	1	Ce	s		
* Ro	Red B	d Blo	lloo	100	00	0	d	2el			
7.04		l,									
		12	e	2		1		2			
0+											
0.			iii a	li		i					
A+				1		-	м. 8				
Δ.			E				5				
B+							7. 7				
8-			1								
48+							5				
15-	2		1	1		4					
Tatal					-		37				
• Re	Red B	d Bio	100				rd .	2el	Autok	goiat	0
► Rei	Red B	d Blo	3100	100			d	cel	Direct	ad)	
			2								
Idleie	iets	:15	5	•							
Y Pos	aoles	oled I	dP	i P	P	P					
Type	pe.	i s	ie,	ie,	ie,		və	tor	.evel		
٥			1		•	1	2				
Α			9	1	9	9					
в			6	6	ň	6					
18	8		3	3	1	3					
Total	641:		3	3	3	31	8				
► Apt	phen	teres	resk	osk	5	sè	si	125	NS.		
-	-		ine	~~		_					
9	CH10	pala	nst	ut:	4)		

4.4 Submitting Hospital Disposition

- 1. Ensure hospital name is accurate for the disposition submission you are going to provide and if not switch hospitals.
- 2. From the BloodCounts menu click on Disposition.



3. Ensure the correct Reporting Month is displayed and if not click on the calendar icon to choose the correct month. If a submission already exists for the month selected, you will receive a prompt allowing you to navigate directly to that submission.



Reporting Month		Hospital Name:	The Ottawa Hospital- Civic Campus	
September 2020		Date Submitted:	2020-10-07 15:26 EDT	
Product Category		Submitted By:	Lisa External Hughos	
Red Blood Cell	0	Submitted by.	Lisa External Hughes	
Platelets	0	Date Edited:		
Plasma Protein Products	0	Edited By:		
Plasma	0			

4. Click to select the blood components/products being reported. You can only report on one product category at a time.

Reporting Month September 2020 Product Category Red Blood Cell Platelets Plasma Protein Products Plasma Plasma	Hospital Name: Date Submitted: Submitted By: Date Edited: Edited By:	The Ottawa Hospital- Civic Campus 2020-10-07 15:26 EDT Lisa External Hughes	



5. The blood component/product selected is displayed. Click the category you want to enter data for, and the table will expand.

Red Blood Cells (Dire	cted)						
Туре	Opening inventory	Received from CBS	Received from other hospital	Received from other sources	Total received	Total dispersed	Calculated total closing inventory
Red Blood Cells					0	0	0
Red Blood Cells (Autologous)					0	0	0
Ped Blood Cells (Directed)					0	0	0



6. Enter the number of units dispositioned in each field as appropriate. Refer to Appendix A for disposition definitions. Use Tab to move between fields. The Total field (bottom row) is automatically calculated.

NOTE: There is no need to enter zeros. Only enter non-zero quantities.

Туре	Transfused	Redistributed	Transferred to another hospital/region	Discarded - outdated	Discarded - received broken	Discarded - broken after receipt	Discarded - returned per CBS	Discarded - failed visual inspection	Discarded - improper storage	Discarded - patient related	Discarded - Other
D+											
0-											
A +											
Ą											
3+											
3-											
AB+											
AB-											
Total:	0	0	0	0	0	0	0	0	0	0	0
ran	sfused		Number of Outer	diau ta	Number of I	-	Oneg Unit	s Transfused to) Total		

NOTE: If your site reports by Totals Only, your entry screen will look like this. Talk to your Hospital Liaison Specialist to ensure you are set up as required for your hospital.

Туре	Transfused	Redistributed	Transferred to another hospital/region	Discarded - outdated	Discarded - received broken	Discarded - broken after receipt	Discarded - returned per CBS	Discarded - failed visual inspection	Discarded - improper storage	Discarded - patient related
0+					1					
0-										
A+										
A-										
В+										
в-										
AB+										
A.D.										



7. When you have completed your entry for all products click Submit.

4.5 Submitting Using Blood Wisely Information

- 1. Ensure hospital name is accurate for the disposition submission you are going to provide and if not switch hospitals.
- 2. From the BloodCounts menu click on Using Blood Wisely.

Canadian Blood Blood Services Homes	Ho The	spital Portal • Ottawa Hospital- Civic Campus				Lisa	a External Hug	hes *
0	0	The Ottawa Hospital- Civic Campus Submissions						
BloodCounts		+ Create • Filters •						
+ Disposition								
+ Inventory		Show per page 10 50 100 150						
+ Using Blood Wisely		Showing 1 to 10 of 34 entries	< Previous	1	2	3	4 Next >	

3. Use the calendar icon to select the Reporting Month. If a submission already exists for the month selected, you will receive a prompt allowing you to navigate directly to that submission.

dCounts sposition ventory sing Blood Wisely	Using Blood Wisely. Using Blood Wisely Using Blood Wisely	anada rvices	
	The data collected with the Using Blood identify how your hospital compares agai hospital. The Using Blood Wisely audit to with a restrictive transfusion threshold. The If you need assistance in answering any	Wisely Red Blood Cell Tran nst the Using Blood Wisely of will allow you to measur nese data collection points of the questions in the surv	sfusion Audit Tool will provide insight regarding red blood cell transfusion practices at your site and will benchmarks. There are multiple ways to evaluate the appropriateness of RBC transfusions at your e two indicators: 1. Percentage of single unit transfusions 2. Percentage of inpatient RBC transfusions will soon be found on the Canadian Blood Services disposition report. rey, please refer to this User Guide
	Reporting Month	Hospital Name Hospital Province: Date Submitted:	The Ottawa Hospital- Civic Campus Ontario 2020-10-08 08-19 EDT

4. Complete all fields. The percentage amounts are automatically calculated.



Number of transfusions where one patient receives 1 RBC unit in one day	81	84.38%
Number of transfusions where one patient receives 2 RBC units in one day	9	9.38%
Sum of the total number of patients transfused each day during the audit period	96	
Number of transfusions with a preceding Hb	186	
Number of transfusions where preceding Hb \leq 80 g/L	109	58.6%
Number of transfusions where preceding Hb \leq 70 g/L	70	37.63%
Total number of transfusions during the audit period	128	

5. Once you have completed your entry click Submit.



4.6 Locating & Editing a Previous Submission

- 1. Ensure hospital name is accurate for the submission you want to locate and/or edit and if not switch hospitals.
- 2. Click the BloodCounts menu and a list of all submissions for the hospital will be displayed.

Canadian Bood Blood Services and Anne	Hos The (pital Po Ottawa Ho	r tal ospita	I- Civic Campus								Lisa Ei	dernal Hugh	es 🔻
	0	The (Ot	awa Hospi	tal-	Civic Campus	Su	bmissions						
BloodCounts		+ Cre	eate	- T Filte	ers 🕨									
+ Disposition					_	_								
+ Inventory	5	Show pe	r pag	je 10 50 100	15	0								
+ Using Blood Wisely		Showing	g 1 to	10 of 34 entries						< Previous 1	2 3	4	Next >	
🏖 Manage		#	¢	Category	¢	Туре	¢	Date Submitted	•	Submitted By		¢ Re	port Month	¢
LUSER LIST		262		Inventory Levels		N/A		2020-10-28 16:18 EDT		ISTest01 Test account01		١	I/A	
		322		Disposition		Platelets		2020-10-28 16:06 EDT		ISTest01 Test account01		2	020-09	
		243		Inventory Levels		N/A		2020-10-27 14:40 EDT		Lisa Test Hughes		١	I/A	
		301		Disposition		Plasma Protein Products		2020-10-27 10:22 EDT		Lisa Test Hughes		2	020-09	

3. To locate a submission, click on Filters. You can filter any combination of Category, Submitted Start and End and reporting Month Start and End. Click Apply Filter and a list of all reports that match will be displayed.

+ Create -	T	Filters 👻				
Category		Submitted - Start	Submitted - End			
Disposition	0	yyyy-mm-dd	yyyy-mm-dd			
Inventory Levels	0	Month - Start	Month - End			
Using Blood Wisely	0)				



4. Click on the submission to open.

Showing 1	1 to 1 of 1 entries					< Previous 1	Next >
#	Category	¢ Type ¢	Month	Submitted By	¢	Date Submitted	
101	Disposition	Red Blood Cell	2020-09	Susan External White		2020-10-01 14:59 EDT	
Showing 1	1 to 1 of 1 entries					< Previous 1	Next >

5. Click on the Category you want to view or edit and the table will expand.

Red Blood Cells							
Red Blood Cells (Autol	logous)						
 Red Blood Cells (Direct 	sted)						
Red Blood Cell Re	conciliation						
Туре	Opening inventory	Received from CBS	Received from other hospital	Received from other sources	Total received	Total dispersed	Calculated total closing inventory
Red Blood Cells	90	70		10	170	84	86
Red Blood Cells (Autologous)					0	0	0
Red Blood Cells (Directed)					0	0	0



Туре Тг	ransfused	Redistributed	Transferred to another hospital/region	Discarded - outdated	Discarded - received broken	Discarded - broken after receipt	Discarded - returned per CBS	Discarded - failed visual inspection	Discarded - improper storage	Discarded - patient related	Discarded Other
0+ 2	24	4	4	1					2		
0- 8	3										
A+ 2	21	8									
A- 6	5										
B+ 4	1	2									
в-											
AB+											
AB-											
Total: 6	53	14	4	1	0	0	0	0	2	0	0
Total: 6	used	14	4	1	0	0	0	0	2	0	0

6. View or make edits as required and click Submit to save any changes.

4.7 Printing Submissions

NOTE: Only print a submission if hospital processes require a printed copy.

- 1. Using the instructions in the previous section locate the submission you would like to print.
- 2. Click on the submission to open.

		101	Disposition	Red Blood Cell	2020-10-01 14:59 EDT	Susan External White	2020-09
--	--	-----	-------------	----------------	----------------------	----------------------	---------



3. To print you can use the print shortcut key (Ctrl P) or the Context menu (accessed using the mouse right click).

NOTE: You do not need to expand the Categories for the information entered in them to display on the print-out.

												Print			3 she	ets
					Quality As	surance					_			_		_
											_	Destinati	on	e c	BSPRT352	
	Reporting Month			Hospital	Name: 1	The Ottawa H	ospital- Civic	Campus			_					
	Septembe	r 2020		Date Sub	mitted: 2	2020-10-01 14	1:59 EDT				_	Pages		All		
	Rent Bloost Ce	9. 1		Submitte	d By: S	Susan Externa	al White									
		-	_	Date Edit	ed: 2	2020-10-01 15	5:02 EDT					Copies		1		
	Plateiess		0	Edited B	y: 8	Susan Externa	al White									
	Plasma Protei	n Products	•									Color		Black	and white	
	Plasma		0													
Red	I Blood Ce	lls		<u></u>	<i></i>	<i></i>	-		<i>w</i> .	<i>tij - 1</i>		More set	ungo			
Red	Transferred	Redistributed	Thanshimed to another beopticities	Discarded -	Discanded - received - broken	Discarded - bruken after receipt	Discarded - refurred per CBS	Discarded - failed visual Impaction	Discarded - Ingraper storage	Discarded - patient related		MOLE SEL	ungs			
Red Type Or	f Blood Ce Transformer	Redstrived 4	Darrohrend in antifer texplaivington 4	Discarded -	Discanded - received broken	Discardod - brisken after recitipt	Discardid - rvfurted per COS	Discarded - farled visual inspection	Discarried - ingrogar storage	Classerind - patient related		More set	ungs			
Red	Translaud 24 8	Reductional 4	Transformed to transformation transformation	Discarded - outlined	Discandad - received broker	Discarded - broken after recape	Discarded referred per COS	Discarded - Faled visual Impactor	Discanded - Insprapar storage 2	Discards d - gather related		More set	ungo			
Red	Translased 24 8 21	Redistributed 4 8	Transformed to enother scapitalized	Discarded - outlined	Discarded - received broken	Discarded - breit anti- recispe	Discardind - cos	Discarded - Discarded - Inspection	Secondar- horizon 2	Decarded	-	More set	ungo			
Red	Transferred 24 21 21 21	Redefinitived 4 8 untsidapo101/edi	Transferred for another tempfortragene	Discurited - oxidated -	Disconder recond inclusion	Discarled - tester weige	Discrified- root al participation of the second sec	Discride - impector	Discarded- instrume and the 2	Discrafting galaxie radiana	1/5	MOLE SET	ango			
Red	1 Blood Ce Transform	IIS Relatived 4 8 autoidaport01/edi	Transferred to Example to the second	December - outland	December	Person -	Discribed- ross of per	Discredul - failed vital important	2 2	Obcession and a second	15	MOR Set	unga			
Red 7999 0- 7999 20 7999	Transluser 24 8 21 21 21 21 21	IIS Retainstated A B Beaterstated Repairmented	Transformed in Examplement in Exampl	Dispetition -	Disconder	Puston U Discontration Fusion	Decented- cest	Characterian Statements	Discarded	Desense daar	15	MOR Set	unga			
Red 7999 0- 4-5000 k	Blood Ce Translass 24 8 21 tood ca/blood co Tournhass 6	IIS Redaintuled 4 0 0 Repairing	A Standard in Frankformed in Frankfo	Despelar - outstand - 1 Despelar - outstand -	Discontration	Fution .	Paramid- 28 to 19	Parter of the second se	Decement above 2 Decement 2 Decement above a	Disculting print diage	115	MORESER	unga			

4.8 Changes in Data Entry Requirements from Previous System

The facility now exists to submit Plasma Protein Product (PPP) Inventory levels.

SD Plasma Disposition and Inventory submissions are now included in the PPP category.

Disposition submissions: If there is nothing to report for a category(s) for the reporting month create the submission and leave all fields blank and click Submit. This will indicate the submission has been made but there was nothing to report.

Inventory submission: If there is nothing to report as required by best practice or when directed by the National Emergency Blood Management Committee (NEBMC) for a category(s) create



the submission and enter one zero in any field for each category and click Submit. This will indicate the submission has been made but there was nothing to report.

5. Reporting & Analytics

Available to Hospital Administrators only. Permissions will be expanded to other hospital users once data from legacy systems has been migrated.

The Reporting & Analytics section of the hospital portal provides interactive screens to hospitals about their transfusion related activities. By clicking on specific navigation users will see the following:



- **Reporting & Analytics:** A summary of disposition activities for 0-12 months, 13-24 months, 25-36 months
- **Disposition Trend Reports:** Detailed reporting and drill-through capabilities for historical disposition data (defaults to Red Blood Cells transfused over the last 12 months). Users can view information in bar or line chart format or view the data only.
- **Inventory Trend Reports**: Detailed reporting and drill-through capabilities for historical inventory data (defaults to Red Blood Cells as reported in inventory over the last 12 months)

Users can interact with the screens to find information of specific relevance to questions. Additional ways to "slice and dice" the data will be added as Canadian Blood Services enhances the capabilities of this section.

Start with selecting filters by adjusting the red toggles. Click Search to see the results of your selections on the resulting graphs.

Red Blood Cells	0	Transfused	0	Redistributed	
Platelets	0	Transferred to another hospital/region	0	Discarded - outdated	
Plasma Protein Products	0	Discarded - received broken	0	Discarded - broken after receipt	e
lasma	0	Discarded - returned per CBS	0	Discarded - failed visual inspection	e
		Discarded - improper storage	0	Discarded - patient related	e
		Discarded - thawed not transfused	0	Non-approved patient transfusion	





When reviewing the results in the graphs, users can toggle anything that has a "colour", by clicking on the legend item. Notice the strikethough in Redistributed in the example below.



Where available, users can click on the tabs to see different types of charts available or choose Export to download the data associated with the charts/graphs in Excel format.

Bar	Line	Data
Expor	t	



6. Targets and Recurring Orders

Available to Hospital Administrators only. Permissions will be made available to other hospital users once legacy data has been migrated and permission levels for various users has been determined.

This system will allow hospitals and Canadian Blood Services to engage and adjust target inventory levels for various products as needed for

- Providing a clear understanding of **inventory targets** for specific products at individual hospitals and across the country
- Identifying standing orders (if your hospital uses standing orders) that will be prepared on a specific frequency (i.e., once per week on Mondays, once per month on the first Monday of every month) and fulfilled through a future online ordering solution that will be housed in the portal. Creating and displaying these standing orders is a future capability.
- Identifying **replenishment orders** that will work in conjunction with hospital reported inventory levels in order to facilitate adjusted order quantities to be fulfilled through a future online ordering solution that will be housed in the portal. Creating and displaying these replenishment orders is a **future capability.**

The Ottawa Hospi	tal- Civic Campus							
ategory		Delivery Da	ay.		Inventory Tar	get		
Red Blood Cells	•	Monday		•	Yes			~
Platelets	0	Tuesday		0	Order Type			
Neuma Destain De		Wednesd		•	Replenish	ment		-
Plasma Protein Pr	oduces 🔍	Wednesd	ay	•	Include inven	ntory up to		
Plasma	0	Thursday		0				~
		Friday		0	Repeat Freq	uency		
O+ Red Blood Ce O- Red Blood Ce	lls x	Saturday		0	Delivery Run			~
vad Product(s)		Sunday		0				~
oduct Name	Product Category	Vial Size	Green Target	Green Target	10% Reduction	Amber Target	Red Target	Remove
•	Red Blood Cells		10	9		8	6	Remove
						-	-	_

Adjustments to any details should only be made in conversations between the Hospital Administrator and the Hospital Liaison Specialist/Canadian Blood Services Distribution.

Initially this section will be blank for Hospital Admins as Canadian Blood Services transfers information from legacy systems.

Targets a	ind	Recur	ring Orders						
T Filters									
Show per page (10	60 100	150						
Showing 0 to 0 o	f0 en	tries				< Prev	vious	Next >	
Hospital Name	۲	Category	Inventory Target	Order Type	ő	ltems ö	Deliv	ery Day	- d
			No data availabl	e in table					
Showing 0 to 0 c	f0 en	tries				< Pre	vious	Next >	



7. APPENDIX A – Data Entry Field Definitions (BloodCounts Application)

7.1 Disposition

Component descriptions per CBS Circular of Information https://www.blood.ca/en/hospitals/circular-information

CBS Visual Inspection Guide referenced in the tables below can be found at https://professionaleducation.blood.ca/sites/msi/files/VAG_en.pdf

The disposition categories, reconciliation and patients transfused definitions in the following tables apply to all products:

- Red Blood Cells (allogeneic, CBS collected autologous and CBS collected directed RBC units)
- Platelets (Pooled and Apheresis)
- Frozen Plasma (Frozen Plasma, FFP apheresis 500ml, FFP apheresis 250ml, autologous and directed FFP/FP), Cryoprecipitate and Cryosupernatant Plasma
- Plasma Protein Products

Examples are provided for some scenarios and include details for other product categories in brackets (...) when the situation might apply.

The details below specify how to include various products in each category in a disposition submission.

Product Type	Include
Red Blood Cells	 Include all dispositioned RBCs including washed and deglycerolized (by hospital or CBS) Aliquots prepared by hospital from same main unit count as 1 unit
Platelets	• N/A
Plasma	 FFP/FP, Divided (pediatric): count each aliquot bag/unit separately ACD FFP Apheresis (250 ml): count as 1 unit, include in the FP section of the submission FFP Apheresis (500 ml); count as 1 unit (no conversion factor required by hospitals) Cryoprecipitate: if pooled at the hospital prior to issue, report each unit in the pool separately (i.e., if 10 units of cryoprecipitate were pooled and transfused to one patient, this counts as 10 units transfused when reporting disposition)
Plasma Protein Products	 Include inventory submissions as communicated by CBS Hospital Liaison team (count each as 1 unit) Include SD Plasma submissions on a monthly basis (count each as 1 unit)



DISPOSITION CATEGORY DEFINITIONS

Disposition Category	Include	Example	Do Not Include & Comments
Transfused	 Units/doses/vials that were entirely transfused any unit/doses/vials that was only partially transfused to a patient units/doses/vials implicated in transfusion reactions that were only partially transfused 	 #1: 75 ml from a 300 ml RBC unit was transfused to a pediatric patient; the remaining 225 ml expired before it could be transfused; 50 ml from a platelet dose is transfused to a neonate, the remaining component expired before it could be transfused; a partial apheresis unit was transfused to a pediatric patient #2: an elderly patient is transfused with only part of a unit/dose due to a cardiac condition. #3: an RBC unit/platelet dose is aliquoted into smaller amounts for transfusion. Aliquots from the same original unit count as only 1 unit transfused. 	 do not include any un-transfused units if part of the unit/dose/vial is transfused and part is discarded, do not report the part of the unit that was discarded.
Redistributed	 units/doses/vials the were redistributed to reduce outdates/improved utilization 	#1: Hospital A had 10 units of group B Rh positive RBC with 10 days left (2 doses of platelets with 24 hours left/4 units of group AB FP with 1 month left) before expiration that they do not expect to transfuse, and Hospital B agreed to accept these units (doses). The units (doses) were shipped from Hospital A to Hospital B.	 do not include any units/doses/vials transferred



Disposition Category	Include	Example	Do Not Include & Comments
Transferred to other hospital/ region	 units/doses/vials that were transferred to other hospital/regions with patients units/doses/vials received by hospital/hospital region/ hospital zone with a centralized inventory intake process, that are then sent to other affiliated hospital sites units/doses/vials shipped to other hospitals/regions to satisfy other hospital request for a particular product 	 #1: Hospital A admitted a patient involved in a car accident, they are stabilized and then transferred to Hospital B that has a trauma program, and 2 units of RBC (1 dose of PLTs/2 units of AB FP) are sent with the patient in the ambulance. #2 Hospital A transferred a critically ill neonate to Hospital B, which has a Level III neonatal intensive care unit. An aliquot of RBCs (one dose of PLTs/a unit of plasma) was shipped with the ill neonate from Hospital A to Hospital B. #3: Hospital A routinely receives blood components from Canadian Blood Services, and subsequently ships blood components to Hospital B and Hospital C*. This activity may be part of a centralized inventory management system, or part of an effort to streamline regional hospital corporation/health region/zone. #4: Hospital A ran out of group O Rh negative RBCs (or group AB platelet or group AB plasma) for a patient with an ongoing need, and they contacted Hospital B who had lots in inventory. Transport time from Hospital B to Hospital	• do not include any units/doses/vials redistributed
Discarded - outdated	 un-entered (intact) units/doses that have exceeded their CBS-assigned outdate vials of product that exceeded manufacturer expiry date un-entered (intact) CBS or hospital modified units/doses that have exceeded their assigned outdate 		 do not include any units/doses/vials that were entering during hospital manipulation and then exceed their hospital assigned outdate



Disposition Category	Include	Example	Do Not Include & Comments
Discarded – received broken	units/doses/vials that were discovered broken upon receipt from CBS		
Discarded – broken post receipt	 units/doses that broke during storage (unit un-entered) units/doses that leaked during entry/spiking for transfusion units/doses that leaked due to faulty weld during use of a sterile connection device vials of broken product deemed broken during hospital storage, redistribution, reconstitution and administration at hospital 		 do not include any units/doses/vials discovered broken upon receipt from CBS
Discarded or returned – per CBS	 units/doses/vials that were discarded at hospital or returned to CBS at the request of CBS/manufacturer 	 #1: CBS issues a blood component recall / withdrawal directing return or discard of units/doses #2: After further discussion with CBS Technical Specialist, decision is made to return product to CBS for further investigation #3: the product manufacturer issues a recall of a lot number of IVIG. CBS communicates the recall to the hospital and requests all remaining vials (with implicated lot #) in inventory be returned to CBS 	
Discarded – failed visual inspection	 Blood Components: as per <u>CBS Visual</u> <u>Assessment Guide</u> PPP products: vials that were visually deemed not acceptable for transfusion on receipt from CBS, during storage, reconstitution or administration at the hospital 	#1: discolouration #2: particulate matter	



Disposition Category	Include	Example	Do Not Include & Comments
Discarded – improper storage	 units/doses discarded due to hospital storage or processing deviations vials that were not transported in appropriate storage conditions (via CBS, or hospital redistribution vials discarded due to storage deviations at hospital 	 #1: RBC exceeds time limit out of fridge; platelet storage area exceeds 24 degrees Celsius; hospital storage freezer temperature deviation Example: RBCs returned to laboratory > 60 mins. #2: storage equipment failure 	
Discarded – patient related	 patient did not require component/vial units/doses used for other purposes PPP product was reconstituted and was not administered prior to expiry 	 #1: patient did not require transfusion #2: patient did not show for transfusion #3: patient deceased #4: patient transferred #5: in-date units/doses/vials (not outdated) used for other purposes in the laboratory 	



For Red Blood Cell Submissions

O Rh neg units transfused to non-O Rh neg patients: include all O Rh negative units transfused to patients who were not group O Rh negative.

For Plasma Submissions

AB plasma units transfused to non-AB patients: include all AB Plasma units transfused to patients who were not group AB. Capture in AFFP, FP and CSP subsections. Autologous and Directed Plasma are exempt from this entry.



RECONCILIATION DEFINITIONS

Reconciliation	Include
Opening Inventory	• The Opening Inventory Count is usually the Closing Inventory Count from the previous month. Perform the count as close to the start of the month as possible. When counting inventory, include units/doses/vials not labeled for patients as well as units/doses/vials that are labeled for patient use but not yet issued to the ward (e.g. crossmatched RBCs).
Received from CBS	• All units/doses/vials received from CBS during the prior calendar month.
Received from other hospital	 Units/doses/vials received to improve utilization (redistribution) Units/doses/vials received from other hospitals/hospital regions with patients (e.g. critically ill or trauma patients) Units/doses/vials received from other hospitals/hospital regions to satisfy another hospital's request for a particular group component (AB FP/FFP, O Rh Neg RBCs).
Received from other source	All units/doses/vials received sources other than CBS (e.g. components from HemaQuebec, rare phenotype RBC units received from the American Red Cross).
Total received	 Total inventory will be automatically calculated by adding opening inventory, received from CBS, received from other hospitals and received from other sources.
Total dispersed	Total dispersed will be automatically calculated by adding transfused, redistributed and all discard reasons together
Calculated closing inventory	Automatically calculated by subtracting Total Received minus Total Dispersed



PATIENTS TRANSFUSED DEFINITIONS

Type of Patient Transfused	Include	Comments
Inpatient	 patient had multiple transfusions during a single hospital admission, count as '1 inpatient transfused'. patient is admitted, transfused, and discharged, and then readmitted and transfused, count as '1 inpatient transfused'. 	 If patient receives transfusion both as inpatient and outpatient in the same month, default as '1 inpatient transfused'
Outpatient	• patient is transfused more than once during the same month as an outpatient, count as '1 outpatient transfused'	
Unknown	unable to determine if patient transfused as inpatient or outpatient	



Inventory

Include the details of a physical count of all units available in inventory not yet transfused or issued to patients.

Product Type	Include
Red Blood Cells	 Include allogeneic, directed, autologous Include cross-matched units Count each as 1 unit
Platelets	 Included pooled and apheresis Count each as 1 unit
Plasma	 Include all plasma units (250 ml = 1 unit, 500 ml = 1 unit) Include cryoprecipitate and cryosupernatant plasma separately from plasma (count each as 1 unit)
Plasma Protein Products	 Include inventory submissions as communicated by CBS Hospital Liaison team (count each as 1 unit) Include SD Plasma submissions (count each as 1 unit)

7.2 Using Blood Wisely

Please refer to the Using Blood Wisely website for more information https://usingbloodwisely.ca/