



URGENT: IMMEDIATE ACTION REQUIRED

To: ALL HOSPITAL SITES
From: National Emergency Blood Management Committee (NEBMC)*
Subject: RECOVERY PHASE for Platelets; and GREEN PHASE ADVISORY for O Red Blood Cells (RBCs) and A Positive RBCs

National Inventory Advisory

Date and time of issue	2023-10-24 5:00pm (EST)
Inventory Availability Phase	RECOVERY PHASE for Platelets and Continuation of GREEN PHASE ADVISORY for O RBCs and A-positive RBCs
Product(s)	Recovery Phase: Platelets Green Phase Advisory: O RBCs (Rh positive and negative) and A-positive RBCs
Description	<p>This is a notice of a Recovery Phase for platelets indicating a period of controlled transition to normal supply within hospitals. Careful monitoring of inventories is required as clinical care services increase. It is anticipated that platelets will be in the Recovery Phase until at least Thursday, October 26, 2023. The NEBMC is meeting again on Wednesday, October 25, 2023, to evaluate the inventory position.</p> <p>The Green Phase Advisory declared on June 16, 2023, remains in effect for group O RBCs (Rh positive and negative) and A-positive RBCs.</p> <p>Hospitals which experience challenges in obtaining orders should inform the local transfusion medicine physician on-call or their Provincial Emergency Blood Management Committee (PEBMC) and highlight if patient impacts have a significant potential to occur.</p>
Impact on hospitals	<p>Action Required for Recovery Phase PEBMC and hospital responsibilities during the Recovery Phase are outlined in The National Plan for Management of Shortages of Labile Blood Components, and include:</p> <ul style="list-style-type: none"> • Slowly adjusting inventory levels of affected components to levels consistent with those previously determined as appropriate for effective recovery. • Slowly reinstating medical /surgical procedures / transfusions (acute and chronic) on the basis of urgency on advice provided by the responsible EBMC. <p>Action Required for Green Phase Advisory Until Canadian Blood Services' inventories for O RBCs and A-positive RBCs recover, it is recommended that hospitals continue to follow best practice for appropriate use.</p> <ul style="list-style-type: none"> • For O-negative RBCs, the NEBMC recommends the best practices outlined in the National Advisory Committee on Blood and Blood Products statement for the: Utilization and inventory management of Group O RH(D)-negative red cells.

	<ul style="list-style-type: none"> • Additionally, the NEBMC recommends the following best practices for all RBC groups, including adherence to patient blood management principles outlined in: Choosing Wisely Canada recommendations related to RBC transfusions <p><i>Shipment Index for RBCs</i> The NEBMC recommends the Shipment Index for group O RBCs be reduced to 15 for O-negative and 10 for O-positive. These targets apply to provinces only (excludes territories) and will be used by PEBMCs to determine how hospital inventory will be allocated in their jurisdictions, to avoid indiscriminate inventory cuts. Not all hospitals will be able to reduce inventories due to local circumstances such as size, proximity, programs, and previous action taken to reduce inventory. It is recommended hospitals confirm with their PEBMCs.</p> <p>The NEBMC recommends the following:</p> <ul style="list-style-type: none"> • All blood system stakeholders should continue to actively monitor inventories and work within their respective PEBMCs to decrease inventories where appropriate to mitigate the risk of further order cuts (where needed across the country). • PEBMCs should be prepared to provide guidance to the NEBMC on hospitals in their jurisdiction where order delays or reductions may be better tolerated than others. • Hospitals should continue to provide inventory levels for group O RBCs and A-positive RBCs by 12:00 noon EST each day. Where possible, platelet inventory levels should also be reported. In the absence of reporting during these inventory challenges, cuts to inventory requests may be made inequitably. Hospital inventory is to be reported via the following link: https://myhospital.blood.ca/, or in accordance with usual provincial practices (British Columbia and Manitoba). • Hospitals should confirm their ability to accommodate Héma-Québec components as well as make any process or system updates required to accommodate Héma-Québec components, should they be provided. Hospital Liaison Specialists will contact select hospitals to determine if they can receive American Red Cross platelets. <p>If a hospital is not aware of what steps to take, they are asked to contact their local transfusion medicine physician on-call, their PEBMC, their Hospital Emergency Blood Management Committee or their Hospital Liaison Specialist.</p>
<p>For more information</p>	<p>For additional info, contact:</p> <ol style="list-style-type: none"> 1. Your representative to the Provincial Emergency Blood Management Committee 2. Your representative to your Hospital Emergency Blood Management Committee 3. Your Hospital Liaison Specialist, Canadian Blood Services

*The National Emergency Blood Management Committee is comprised of the National Advisory Committee on Blood and Blood Products, Provincial Territorial Blood Liaison representatives and key Canadian Blood Services personnel. This group will develop recommendations and provide advice to the P/T Ministries of Health, hospitals and regional health authorities, and Canadian Blood Services to support a consistent and coordinated response to critical blood shortages in Canada.

For information about the National Blood Shortages Plan, please see: <http://www.nacblood.ca/resources/shortages-plan/index.html>.

If you require this advisory in an accessible format, please contact your local Canadian Blood Services Hospital Liaison Specialist.