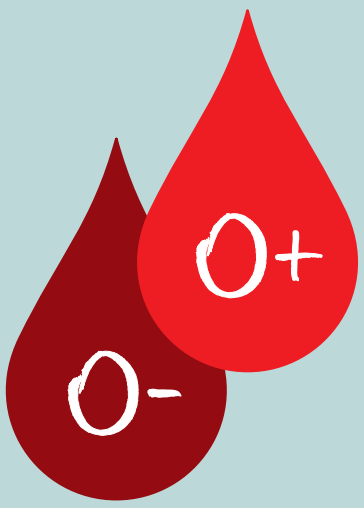
American Red Cross

Empower GROUP O CARE

Impacting Stewardship of Group O Blood



National data reveals O negative red blood cells are in chronic short supply. The supply challenges are further intensified by a declining donor base and changing donor demographics. The trajectory is unsustainable.

It's our collective obligation to act now to ensure product availability for patients who need it most.

Empower Group O Care is designed to strengthen blood supply resiliency by advancing sustainable stewardship practices. Responsible use of O negative and O positive blood is required to ensure these vital resources are readily available for patients when needed.

	Preparatory Actions	Emergency Transfusion Actions
Start Smart	Develop standard protocols for emergency transfusions of patients with unknown blood types.	Start adult males and females past childbearing age on O positive red cells when blood type is unknown. Reserve O negative red cells for O negative patients or females of childbearing potential with unknown blood type.
	Stock type-specific red cells and order type-specific antigen-specific red cells in advance of procedure.	Provide type-specific units whenever possible.
Switch Sooner	Develop policies to expedite sample collection and testing of patients with unknown blood types.	Transition patient to type-specific blood upon completion of pretransfusion testing.
	Develop standard protocols that describe when to transition O negative patients to O positive transfusions before depleting O negative inventory, such as when the patient is experiencing significant bleeding or during critical inventory shortages.	Transition patients to O positive red cell transfusions before depleting O negative inventory or delaying a blood transfusion.
Know Where Your Os Go	Perform audits to understand O negative utilization patterns, evaluate O negative transfusions provided to non-O negative patients and examine transfers and returns.	Reserve O negative red cells for O negative patients or females of childbearing potential with unknown blood type.
	Gradually reduce par levels if a significant number of short-dated O negative units are transferred or transfused to non-O negative patients to avoid expiration.	Perform review to ensure emergency transfusion procedures were followed post emergency release.
Safe Choices	Develop a policy (or policies) to monitor Rh negative patients for alloimmunization after Rh positive transfusions.	Screen Rh negative patients after Rh positive transfusion to evaluate for development of anti-D antibodies.
	Develop policies on when to consider RhIg prophylaxis.	Provide education and resources for patients who become alloimmunized.
Be Ready	Ensure blood bank staff are trained and prepared to implement emergency transfusion protocols and policies. Educate staff on the risk of alloimmunization and safety of O positive red cells to instill confidence.	Conduct simulations, drills and mock emergency transfusions to ensure readiness.