



# In a Different Vein

A NEWSLETTER OF THE  
**MICHIGAN  
ASSOCIATION  
OF  
BLOOD BANKS**

Vol. XIV, No. 1

Winter, 2002

## President's Message

### Looking Forward to 2002

It's a new year, 2002. I like the way the number looks and sounds. It is orderly and well balanced with a solid stable ring to it. It appeals to the blood banker in me. (You know how much we like things neat and orderly.) I hope it will be a good year. Last year seemed somehow out of kilter, lacking stability. On New Year's Day instead of making my standard resolutions to lose weight, start exercising and to make time for myself, I found myself counting my blessings. My family, my friends, and my job were right up there on the top of the list.

My job? Why should I be thankful for my job? It consists of long hours, hard work and nobody has a clue as to what I do (some days not even me). If I try to explain my job to others, they usually utter something like "Oh, you work in the blood bank. Do you draw blood? Aren't you afraid of getting some awful disease?" Not exactly the pat on the back that I was hoping to get. I want them to remind me that what I do is important life saving work. I need reminding. I fret about all the little things like FDA regulations and fail to see the good things that are a result of our hard work. Blood bankers save lives.

That's why I am so proud to belong to the MABB. It is a professional organization of wonderful people all dedicated to improving the lives of others. It provides me with a forum to share my problems and to find solutions. I enjoy the educational opportunities. Best of all, it has helped me to find friends who share my passion for antibodies. No small accomplishment!

A few weeks ago, each of you should have received your membership renewal in the mail. I hope that you have already filled it in and mailed it back. If not, would you please make a note to yourself to renew soon? Every member is valued and needed. It would be great if you could encourage a coworker to join as well.



*Linda Cardine  
MABB President*

The education committee is planning a few surprises. They are trying some new formats for lectures. One is to start in the middle of the day, provide lunch and then present a topic for discussion. The first topic is going to be on blood utilization. If you have suggestions for other topics or other time frames, please contact Dr. Drew and she can present it to the committee.

Speaking of committees, it is time to form committees for 2002. Have you considered joining a committee? New faces and new ideas are as welcome as the familiar ones. Please contact Janet Silvestri at the administrative office and let her know what committee you would like to join.

Mark your calendar for May 9<sup>th</sup> for the Spring Workshop. It will only be one day this year, but the committee promises that it will be day that you won't want to miss.

The Annual Meeting is scheduled for September 11<sup>th</sup> and 12<sup>th</sup>. We hope it will be as memorable as last year, but for better reasons. Michelle Tuson is planning contests to jump-start your enthusiasm and involvement.

Involvement is what our organization needs. The involvement of every member is essential to its strength and growth. Please renew your membership in the MABB. 2002 is shaping up to be a banner year and it won't be the same without you. Looking forward to seeing you.

**MICHIGAN ASSOCIATION  
OF BLOOD BANKS**

Administrative Office  
**P.O. Box 3605**  
**Center Line, MI 48015-0605**  
**(586) 573-2500 • (586) 573-7058 Fax**  
**Web Site: mabb.org**

*In a Different Vein* is a quarterly publication of the Michigan Association of Blood Banks.

Please feel free to submit any articles, announcements, advertisements, or case studies to *In a Different Vein*. Items of a personal note regarding colleagues are also welcome.

**Send articles to editors:**

**Mary DePouw**

Crittenton Hospital Blood Bank  
1101 W. University Drive • Rochester, MI 48307  
(248) 652-5275

-or-

**Ann Steiner**

Ortho-Clinical Diagnostics  
1 (800) 523-6911 Ext. 4103

**2001 - 2002 MABB OFFICERS**

**PRESIDENT**

Linda Cardine, MT(ASCP)SBB

**PRESIDENT-ELECT**

Michelle Tuson, BS, MT(ASCP)SBB

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Patricia Fedoronko, MT(ASCP)SBB

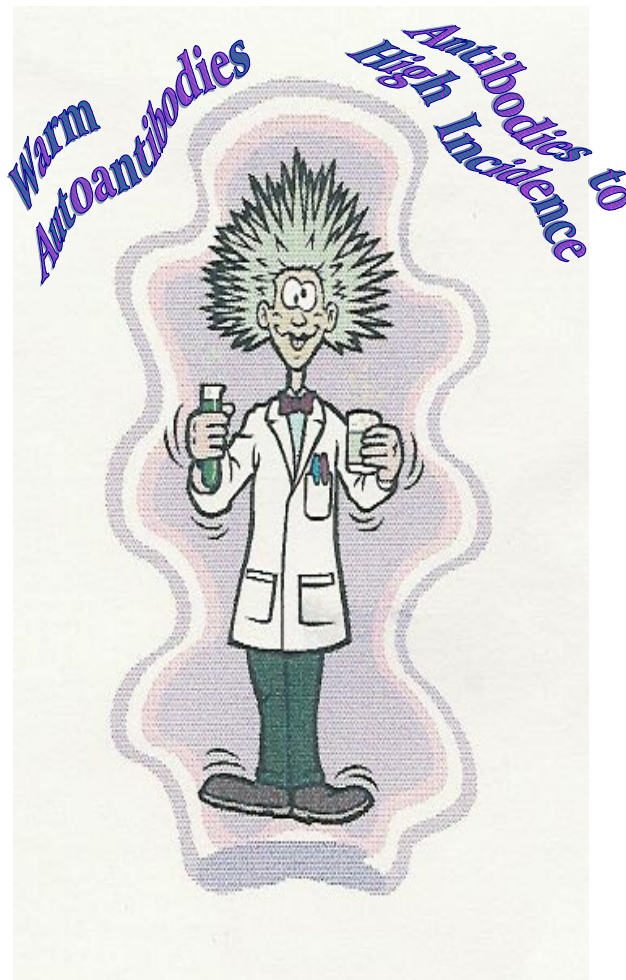
**MEMBERS-AT-LARGE**

MaryJo Drew, MD, MHSA  
Bruce Newman, MD  
Peggy Stoe, MT(ASCP)SBB, CQA, ASQ  
Margaret Wilde, MT(ASCP)SBB

**"STRESS" ANTIBODIES:  
HOW TO COPE WHEN  
EVERYTHING IS POSITIVE**

**MABB SPRING WORKSHOP  
THURSDAY • MAY 9, 2002**

**LECTURE AND WORKSHOP  
NEW ONE-DAY FORMAT**



**Stay tuned for  
more details in  
"In a Different Vein"  
and on the  
MABB website: mabb.org**

**MABB members will receive  
brochures in March with  
registration forms for the  
Spring Workshop**

# MABB 2002 RAP Session —

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## Blood Utilization Review: Can You Manage It?

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Wednesday, March 20, 2002  
12:30pm – 4:30pm  
Kresge Eye Institute  
Hutzel Hospital • Classroom B

Lunch 12:30 - 1:30  
Speakers 1:30 - 4:30

### **Featured Speakers**

#### **Jane Ulmann-Vester**

Transfusion Specialist

American Red Cross - North Central Blood Services

*Jane will present various aspects of blood utilization...  
autologous usage, MSBOS, etc.*

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#### **Dr. Rob Davenport**

Medical Director • Blood Bank and Transfusion Service  
University of Michigan Hospitals  
“Setting Transfusion Criteria”

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#### **Dr. Martha Higgins**

Medical Director • Transfusion Service  
St. John Hospital  
“Utilization review without the benefit  
of a transfusion committee”

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**Jane Ulmann-Vester's  
expenses and RAP luncheon sponsored by  
the American Red Cross/SE Michigan Region**

**To register contact:**

**Janet Silvestri at the  
MABB Administrative Office  
586/573-2500 or via e-mail at [janet@hfcc.net](mailto:janet@hfcc.net)**

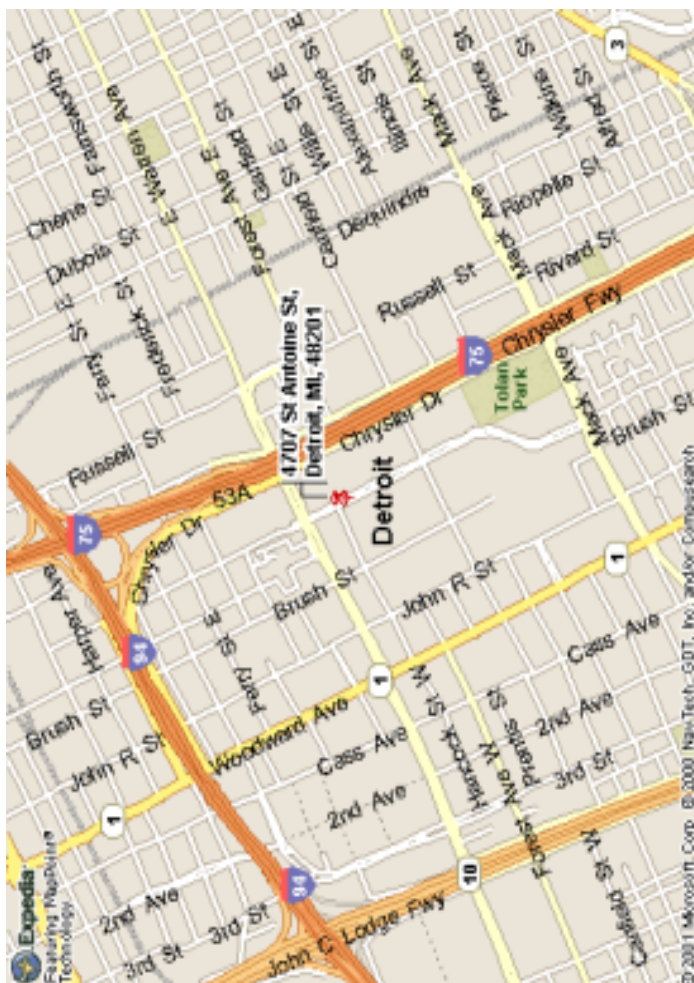
**by Friday, March 15, 2002 at 4:00 p.m.**

**For additional information contact:  
Margaret Wilde • 313/745-2536  
- or -**



*The Kresge Eye Institute is on the immediate right when you pull in the drive from St. Antoine. They have valet parking and the parking structure is directly across from Kresge. The classroom is in the same area as the auditorium, which is near the main entrance.*

### **Map to Kresge Eye Institute:**





# Meet the Board

Mary Jo Drew, MD, MHSA

I am a Colorado native, born and raised in Greeley, Colorado. I attended the University of Northern Colorado there, graduating with a BA in Biological Sciences, then moved to Denver to attend the University of Colorado School of Medicine. Certain I was going to specialize in internal medicine, I was surprised in my second year when the director of the pathology course suggested I consider pathology! I matched at Colorado, and spent four years there in a pathology residency.



Certain I would become a surgical pathologist, I happily chugged along in my residency until late in my second year (is there a trend here, or what?), when, while reviewing surgical pathology cases, I realized I could not do this for 30 years!! I remembered the fun I'd had in the blood bank and hemepath during my first year, and decided to pursue those areas. This was not encouraged by my residency director, who told me I would never get a job with only CP boards! I did have a champion in Dr. Sara Winter, a pathologist at (then) Denver General Hospital, who encouraged me to go in this direction.

I accepted a Transfusion Medicine fellowship at Southwest Florida Blood Bank (now Florida Blood Services) in Tampa, not because it was as far from Denver as possible, but because Dr. Paul Schmidt was the medical director. I enjoyed a busy year and was asked to join the team as assistant medical director. I did this for a year, until I was contacted by a former CU pathologist, now in Little Rock. Would I come there to direct the blood bank?

I spent 6 enjoyable years directing the blood bank at the University of Arkansas Hospital. We grew our hospital donor center to 11,000 whole blood and platelet donors a year by the time I left to come to Henry Ford Hospital. HFH is my kind of practice—hospital transfusion service, donor room, therapeutic apheresis residency program. I've had a great time putting my 'stamp' on the job of Division Head of Transfusion Medicine. Learning the ropes of managed care was a challenge, so I decided to expand my knowledge by obtaining a Master of Health Services Administration degree at the University of Michigan in 2000.

In my limited allotment of spare time, I enjoy reading, classical music, quilting, interior design, and travel. I also enjoy learning more about my field by chatting on the AABB and other transfusion medicine web sites.

# Membership Update

Have you sent in your 2002 Membership Dues yet? YOU are the reason that the organization exists. Each member within the organization is valued and we strive to continually provide first rate educational programs for our members. Some of the benefits of membership in the MABB are:

- Educational opportunities
- Free subscription to "In a Different Vein"
- Discounts on all educational meetings and workshops
- Free selected teleconferences
- Professional resource sharing
- Voting rights at MABB business meetings
- An opportunity to support your profession

You should have already received your membership renewal form for 2002. If you are not a current member and would like to join, please contact Janet Silvestri at the MABB Administrative Office at (586) 573-2500 or at: [janet@hfcc.net](mailto:janet@hfcc.net). You may also print a membership form off of the MABB website at: [mabb.org](http://mabb.org).



**MABB...**  
**YOUR Professional**  
**Association**

## Vi Williams Scholarship

Ortho Clinical Diagnostics sponsors the Vi Williams Scholarship to assist with the cost of attending the Spring Workshop. Applicants are eligible for a \$125 scholarship.

The Vi Williams Scholarship is in memory of Vi Williams, who died in 1983. She was the Chief Technologist at William Beaumont Hospital in Troy and was a very active member of MABB, especially the Education Committee. She is most remembered for her commitment to quality in education and medical technology.

The scholarship is available to any non-supervisory medical technologist working in the field of immunohematology. The applicant must be a member of MABB at the time of application. The applicant must explain in writing how they would benefit from attending the Spring Workshop. The award will be presented at the lecture session on May 9, 2002.

### **Deadline April 5, 2002**

Send completed application to:

**Linda Cardine, MT(ASCP)SBB  
Supervisor/Blood Bank  
Henry Ford Hospital  
2799 W. Grand Blvd. • Detroit, MI 48202  
(313) 916-1572 • (313) 873-7427 Fax  
e-mail: lcardin1@hfhs.org**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Blood Bank Affiliation: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

How will I benefit from attending the Spring Workshop? (Use additional pages if necessary):

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## Emanuel Hackel Scholarship

The Michigan Association of Blood Banks sponsors the Emanuel Hackel Scholarship to defray the cost of attending the Spring Workshop. Applicants are eligible for a \$250 scholarship.

Dr. Hackel is professor emeritus at Michigan State University. He has been involved in the Spring Workshop for many years and he will once again be the moderator for the lecture session of the Spring Workshop in May. He has been a long time supporter of the MABB.

The scholarship is available to any medical technologist in the field of immunohematology, blood banking, or histocompatibility. An MABB member must nominate the recipient or an MABB member may nominate him/her self. To apply, the nominee must explain how they would benefit from attending the Spring Workshop. The MABB Board of Directors will select the recipient and the award will be presented at the lecture session on May 9, 2002.

### **Deadline April 5, 2002**

Send completed application to:

**Linda Cardine, MT(ASCP)SBB  
Supervisor/Blood Bank  
Henry Ford Hospital  
2799 W. Grand Blvd. • Detroit, MI 48202  
(313) 916-1572 • (313) 873-7427 Fax  
e-mail: lcardin1@hfhs.org**

### **Nominee Information**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Blood Bank Affiliation: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

How will the nominee benefit from attending the Spring Workshop? (Use additional pages if necessary)

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Nominated by: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

# UNIVERSAL LEUKOREDUCTION: A HOSPITAL'S PERSPECTIVE

*Mary Jo Drew, M.D., M.H.S.A.  
Henry Ford Hospital Blood Bank*

The prospect of universal leukoreduction of blood components (ULR) ushers in a new set of dilemmas for the hospital transfusion service, transfusion service physicians, physicians who prescribe blood components, and hospitals struggling to stay in business in the face of increasing costs. One of these costs is the cost of blood safety measures, which, at least for hospital inpatients, is currently not adequately considered when insurer and federal payor reimbursement levels are calculated under DRGs. For this and other reasons, implementation of ULR may not be an entirely positive event for hospitals. This essay will present some of the medical practice, business and scientific issues that may face the hospital transfusion service director when deciding to implement ULR at his/her facility.

The established indications for leukoreduction (LR) are by now familiar. Currently, these indications include 1) prevention of recurrent, febrile nonhemolytic transfusion reactions, 2) prevention of primary alloimmunization to HLA antigens, and 3) prevention of primary CMV infection in susceptible patients. An indication for LR, not established by well-designed clinical studies, is the prevention of the immunomodulatory effect of allogeneic transfusion, which might prevent both the metastatic spread of cancer and the occurrence of post-operative infection. Whether or not ULR will serve to prevent transmission of new variant Creutzfeldt-Jakob disease (nvCJD) is completely unknown, as it is not yet clear whether the this infectious agent is transmissible via blood transfusion.

**The case for ULR.** First, some positives. ULR would eliminate dealing with a "dual" blood inventory, both for blood centers and hospitals. No decisions would have to be made as to which patient receives which type of product, and no patients who need LR products for established indications will be missed. Prestorage

LR products should provide consistent quality in terms of residual WBCs. If a conversion from bedside LR to prestorage LR is made, prestorage LR products will ensure that patients receive a truly LR product.

**Issues facing hospitals.** An important question facing facilities dealing with the implementation of ULR is whether the use of LR blood components is primarily a medical practice issue or a blood safety issue. Hospital physicians may prefer to retain the option of utilizing LR products only in the subsets of patients for whom there is well-established clinical benefit. On the other hand, a blood center producing solely LR products may be doing so for ease of manufacturing and to increase the general perception of blood safety. When a blood center announces its intent to produce only LR products, physician choice is eliminated.

Then, there is the dollar dilemma. At least two immutable truths apply to economics in the context of blood products. Drew's First Rule of Blood Bank Economics states that blood center charges to hospitals will be paid, or there will be no blood products supplied to the hospital. Drew's Second Rule of Blood Bank Economics states that the hospital MAY be reimbursed for its blood product outlays—partially, after a long delay, or not at all. However, the hospital cannot, ethically or by law, discontinue providing blood components and other services to patients. A corollary to Drew's Second Rule states that hospital services provided to non-paying patients are not cost-free. These truths provide insight into hospitals' reactions to large price increases for LR blood components, when debate about their advantages for all patients is ongoing.

In view of the very high quality adjusted life year (QALY) cost of ULR—often estimated at over \$1 million per QALY saved—resistance to implementation may also come from hospital administration, when scarce resources must be allocated to interventions that produce the most "bang for the buck". Cost-effective medical interventions traditionally have costs of \$50,000/QALY or less. Absent a clear mandate or deadline from the FDA for implementation of ULR, it may be an even harder "sell" to hospital administrators, whose budgets are already stretched in other patient care areas.

**Science or supposition?** Recent data<sup>1,2,3,4,5</sup> has shed more light on whether claims of cost reductions from implementation of ULR—due to decreased length of

*continued on page 7*

## UNIVERSAL LEUKOREDUCTION: A HOSPITAL'S PERSPECTIVE

*continued from page 6*

hospital stay and fewer postoperative infections—hold up when subjected to well-controlled studies. In many instances, it has been found that initial projections of cost reduction or reduced complications of transfusion did not materialize under ULR. Differences in costs could sometimes be attributed to differences in patient groups other than the use of LR blood components. Such differences may include severity of patient illness, grade and stage of tumor, extent of surgery performed, and definitions of postoperative infection in a given institution. Other studies have found that LR blood components have no effect on rates of cancer recurrence, but that perioperative transfusion, whether LR or not, may shorten survival after cancer surgery.<sup>6</sup> These findings may suggest that factors other than WBCs may contribute to shortened survival in some patient groups post-transfusion.

Some may claim that “the horse has already left the barn” as far as implementation of ULR is concerned, and that presenting data now on the scientific merit of ULR is much like locking the barn door after the fact. Some may point to the requirement for HIV p24 antigen testing of blood donors as another example of a blood safety measure that was implemented even though data showed that return on the investment would be minimal to none. Contrarians in our profession would counter with two observations. First, whenever possible, it is incumbent upon medical practitioners to base on sound science (rather than opinion, conjecture, or politics) actions with far-reaching monetary and policy implications, such as the implementation of ULR. Second, having made questionable policy decisions concerning blood safety measures in the past does not justify a possible repeat performance!

**The “standard of care”.** Another question for hospital transfusion service directors is, what standard of care governs the implementation of ULR in a hospital? Different standards of care may exist, depending on one’s perspective. If the sole blood center in a community implements ULR, then this is the de facto standard in that community. If a hospital’s physicians wish to use LR blood components only in patients for whom clear benefit has been demonstrated, another standard is set. If the hospital standard differs from

the community standard, what, if any, consequences may result for the hospital? And, with divergent opinion in the blood community regarding implementation of ULR, who, if anyone, can claim to be setting the national standard of care?

The trail to ULR will surely be littered with good intentions, conflicting opinions, and changing findings as studies continue to emerge on its merits. It is hoped that the issues presented here will cause a “pause to ponder” amongst transfusion medicine specialists and other health care providers charged with making decisions in this area.

### References

1. Dzik S, Anderson JK, O'Neill M, et al. A prospective randomized trial of universal leukoreduction. Abstract. Transfusion 2001;41(9S):1S.
2. Ratko TA, Cummings FP, Oberman HA, et al. Evidence-based recommendations for the use of WBC-reduced cellular blood components. Transfusion 2001;41:1310-19.
3. Vamvakas EC, Carven JH. RBC transfusion and postoperative length of stay in the hospital or the intensive care unit among patients undergoing coronary artery bypass graft surgery: the effects of confounding factors. Transfusion 2000;40:832-9.
4. Groth CA, Mathew J. The effects of leukoreduced red cell products on hospital length of stay, total hospital charges and postoperative pneumonia and/or wound infection rates in surgical patients. Abstract. Transfusion 2001;41(9S):6S.
5. Transfusion with leukocyte-reduced blood components does not reduce length of stay or hospital costs for patients undergoing coronary artery bypass graft surgery. Transfusion 2001;41(9S):6S.
6. van de Watering LMG, Brand A, Houbiers JGA, et al. Perioperative blood transfusions, with or without allogeneic leucocytes, relate to survival, not to cancer recurrence. Br J Surg 2001;88:267-72.



## It's Never Too Early...

...to start thinking about topics for poster presentation at the MABB Annual Meeting, to be held September 11 & 12, 2002. The MABB Education Committee is promoting the poster session by getting an early start on encouraging poster submissions. Posters may be submitted on any topic — technical, medical, administrative, educational. Any poster that addresses an attempt to solve a vexing blood bank problem is particularly valuable. Among the MANY topics that make excellent poster presentations:

- ❖ Baffling serologic case studies and their resolution
- ❖ Reconfiguring your lab for blood bank automation
- ❖ Methods of coping with the technologist shortage
- ❖ Patient case studies in transfusion and apheresis
- ❖ Designing and implementing a quality assurance program

We all have a wealth of cases and practical experience that will enrich the fall meeting. Put on your thinking cap, and become a part of this exciting learning experience! Please contact Dr. Mary Jo Drew, Education Committee Chair, at (313) 916-1573, or at [mdrew1@hfhs.org](mailto:mdrew1@hfhs.org), for further information.



## Pick a Committee . . . Any Committee!



Now is the time to become more active in your professional association! There are spots available on all committees to offer your input and expertise.

**Education Committee:** This committee is responsible for planning the RAP Session, Cyberconference, SBB Lecture Series, SBB Review, Management Seminar and Spring Workshop. Each one of those projects has their own chairmen and sub-committee. For information contact Dr. MaryJo Drew at 313-916-1573, or at [mdrew1@hfhs.org](mailto:mdrew1@hfhs.org).

**Membership Committee:** This committee is responsible for publishing articles for the newsletter and mailers to members and prospective members to retain current membership and attract additional members to the association. For information contact Jan Keersmaekers at 313/833-2634 or at [Keersmaekj.@usa.red.cross.org](mailto:Keersmaekj.@usa.red.cross.org).

**Publications Committee:** This committee is responsible for publishing the MABB Quarterly Newsletter, "In A Different Vein." The focus of the committee is to present articles of interest in blood banking and news of upcoming events. For information contact Mary DePouw at (248) 652-5275 or at [mdepouw@comcast.net](mailto:mdepouw@comcast.net).

**Annual Meeting Committee:** This committee is responsible for planning the MABB Annual Meeting each fall. Program planning begins in January of each year, when members gather to present ideas of interest and discuss the speakers and other meeting details. There is a separate committee for site planning, which handles the meeting site arrangements. For information contact Michelle Tuson at (248) 858-6062 or at [TUSONM@trinity-health.org](mailto:TUSONM@trinity-health.org).

**Spring Workshop Committee:** This committee is a sub-committee of the Education Committee and is responsible for planning the annual Spring Workshop. The committee decides what the topics will be for the lecture and wet workshop and suggests potential speakers. For information contact Michelle Horan Bensette at (734) 936-6888 or at [horan@umich.com](mailto:horan@umich.com).

**By-Law/Policy Committee:** This committee is responsible for periodically reviewing the By-laws of the Association to ensure that proper procedures are being followed. Changes to by-laws are also reviewed as necessary. This committee is in need of a chairperson. For information contact Linda Cardine at (313) 916-1572 or at [lcardine1@hfhs.org](mailto:lcardine1@hfhs.org).



## Announcing...a contest for the Top Ten Reasons that Blood Banking is FUN!

Please submit your ideas to the MABB Administrative Office as to why you think that blood banking is fun. An independent group will determine the ranking of all of the ideas submitted. We will then present the Top 10 at the next annual meeting set for September 11 and 12, 2002. We will have some fun prizes to go along with this, so send in your reasons today!

To submit your ideas, you may complete this form and fax it to the MABB Administrative Office: 586/573-7058

-or-

you may e-mail your ideas to Janet Silvestri at [janet@hfcc.net](mailto:janet@hfcc.net)

10. \_\_\_\_\_

9. \_\_\_\_\_

8. \_\_\_\_\_

7. \_\_\_\_\_

6. \_\_\_\_\_

5. \_\_\_\_\_

4. \_\_\_\_\_

3. \_\_\_\_\_

2. \_\_\_\_\_

And the No. 1 Reason why Blood Banking is FUN is...

1. \_\_\_\_\_

Submitted by: \_\_\_\_\_

Name

Institution: \_\_\_\_\_

# 2002 Program Planning

**On December 5, 2001, the 2002 Program Planning Committee met to plan the 2002 MABB Annual Meeting, to be held September 11-12, 2002.**

**Here are some photo highlights...**



*A well deserved pat on the back from John Judd... "Michelle, you are doing a 'bloody good job'!"*



*A review of the Annual Meeting drew smiles...*



*...and then someone brought up the budget!*



*A little networking about the med tech shortage*



*TEAMWORK...Sharon Cisco and Michelle Tuson*



*Even a professional program coordinator gets giddy!*



*St. Joe's in Pontiac was well represented at the planning meeting*



*Some suggested topics were passed under the table*



**MICHIGAN ASSOCIATION OF BLOOD BANKS**  
P.O. Box 3605 • Center Line, MI 48015-0605



## Internet Corner

To assist in HCV Lookback cases, a search on the internet may be useful. The living status of the recipient is rarely easy to determine. Two sites list people who have received social security benefits and have since died. The social security number and residence state must be entered.

[www.ancestry.com/SSDI](http://www.ancestry.com/SSDI)  
[www.rootsweb.com](http://www.rootsweb.com)

The California Blood Bank Society has a web site with numerous features overflowing with information. The "hot topics" section and e-Network Forum section provide good resources for questions and ideas.  
[www.cbbsweb.org](http://www.cbbsweb.org)

## Calendar of Events

**March 20, 2002**

**MABB 2002 RAP Session**

**Kresge Eye Institute/Hutzel Hospital (see info on pg 3)**

**April 5, 2002**

**Scholarship Nominations for  
Spring Workshop Due**

(see nomination forms on page 5 of this issue)

**May 9, 2002**

**MABB Spring Workshop  
New 1-Day Format**

**September 11-12, 2002**

**MABB Forty-Eighth  
Annual Meeting**

**DoubleTree Hotel • Romulus, MI**

