Have You QBL’d Today?
Measuring blood loss as accurately as possible is *essential* to identifying and responding to hemorrhage

- Significant volumes of blood loss are consistently *underestimated*
- QBL increases our knowledge of blood loss and is more accurate than estimated blood loss (EBL)

Blood loss should be measured using formal methods:

- Graduated containers
- Visual comparison tools
- Weight of blood soaked items

CMQCC Obstetric Hemorrhage Toolkit (2015)

DENIAL leads to DELAY
WHAT?

- Quantification of blood loss (QBL) is the *method* of determining your cumulative blood loss:

  blood loss at delivery
  +
  blood loss during recovery
  = cumulative blood loss

- The goal is **NOT** a “perfect, precise” number
  - Inaccuracies will persist (amniotic fluid contamination, urine, blood clots/other mixed with fluid in the drapes and suction canisters)
WHO?

The switch from EBL to QBL will be an adjustment for many staff and will take **TEAMWORK!!**

*OB Providers*

*Anesthesia*

*RNs*

*CSTs*
The ultimate goal is QBL for *every* delivery!

*Why every delivery?*
If it’s not standard for all deliveries, then we don’t know how to do it when we need it

*and*

we don’t recognize WHEN we need it until late in the game...
QBL IN THE OR

Measured

- 1 mL measured = 1 mL blood loss

Weighted

- 1 gm weighed = 1 mL blood loss

Quantified

- Total measured + total weighed = QBL
**How?**

**Three-Step Quantification of Blood Loss in a Scheduled C-Section:**

- **Step One: Suctioned Blood**
  - Between delivery of infant and placenta:
    - CST/OB suctions drape of amniotic fluid
    - Anesthesia will call out the “baseline” volume (pre-placenta volume)
    - Circulator records “baseline” volume on QBL calculator sheet

  - After delivery of the placenta all volume is now considered “blood loss” (post-placenta volume) until irrigation begins:
    - CST will call out *before* irrigation begins
    - Anesthesia will announce “total volume” before irrigation
    - After irrigation complete, circulator will subtract baseline volume and irrigation volume from “total volume” to determine “blood loss volume” on QBL calculator sheet
How?

THREE-STEP QUANTIFICATION OF BLOOD LOSS IN A SCHEDULED C-SECTION:

- **Step Two: Lap Sponges**
  - During case, bloody lap sponges will be passed off sterile table by CST
  - Circulator places in hanging lap holders (5 sponges/sleeve)
  - Circulator weighs bloody lap sponges and lap holder *all* together near end of case (sponges left in lap holder)
  - Number of sponges weighed, number of lap holders weighed, and total weight are recorded on QBL calculator spreadsheet (i.e. you weighed 20 lap sponges in 4 lap holders/sleeves, and the total weight of all of this is converted from kilograms to grams before it is recorded on calculator sheet)
How?

Three-Step Quantification of Blood Loss in a Scheduled C-section:

- Step Three: Conclusion of the OR Case
  Total volume of blood loss from Step One (measured)
  +
  Total weight of blood loss from Step Two (weighed)
  =
  QBL in the OR
**RECOVERY**

- Primary RN will continue to weigh bloody items throughout recovery of C-section patient and document totals on back side of the QBL calculator sheet.

  - Total recovery quantitative blood loss will be added to QBL from the OR:

    \[
    \text{QBL in the OR} + \text{total blood loss in recovery} = \text{Cumulative blood loss}
    \]

    *(Remember: 1 gm = 1 mL blood loss)*

    QBL is documented as *milliliters*
VAGINAL QBL

- **Measured**
  - 1 mL measured = 1 mL blood loss

- **Weighed**
  - 1 gm weighed = 1 mL blood loss

- **Quantified**
  - Total measured + total weighed = QBL
QBL for Vaginal Delivery: HOW?

After delivery of infant (prior to delivery of placenta), ask the OB provider for the baseline volume (amniotic fluid, urine, etc.)

At the end of the delivery procedure, ask the OB provider for the total volume. You will then subtract the baseline volume from the total volume to obtain your measured QBL.

Weigh bloody items and subtract the dry weights = weighed QBL. measured + weighed = Vaginal QBL.
**Baseline Volume**

- May include urine, feces, and amniotic fluid
- Document volume in drape, prior to delivery of the placenta, on the QBL sheet
- At the end of the delivery procedure, the baseline volume will be subtracted from total volume in the drape.

Example: *Baseline Volume = 250mL*
TOTAL VOLUME

- Document volume in drape, following delivery of placenta and repair (if needed), on the QBL sheet

- At the end of the delivery procedure, you will subtract your baseline volume from the total volume to obtain your measured QBL.

Example: 750 mL - 250 mL = 500 mL measured QBL
**Weighed Bloody Items**

- Weigh bloody items on scale
- Subtract dry weights using QBL sheet
- Remember 1 gram = 1 mL
Total measured volume of blood loss
+
Total weighed volume of blood loss
=
Vaginal QBL