

Five Things Patients and Providers Should Question

1

Do not place a central venous catheter if peripheral vein access is a safe and effective option.

For most adult patients and donors, peripheral venous access is the safest, quickest and most easily achievable route for performing a limited number of apheresis procedures. Avoiding a central venous catheter reduces the risk of harm.

2

Do not routinely use plasma as replacement fluid for therapeutic plasma exchange unless there is a clear indication to replete a plasma component.

Plasma is a limited resource with added concern for potential transmission of infectious agents and transfusion reactions. Albumin is an effective replacement fluid for therapeutic plasma exchange and is a safe alternative to plasma when a pathogenic protein or solute is removed without the need to replete any plasma component.

3

Do not continue simple transfusions in patients with stroke from sickle cell disease who have iron overload, if red blood cell exchange is available.

Stroke is a common cause of serious morbidity in children and mortality in adults with sickle cell disease. Exchange transfusion is a more effective method than simple transfusions to prevent both recurrent strokes and the complications of iron overload.

4

Do not routinely monitor coagulation tests during a course of therapeutic plasma exchange, unless the procedure is performed daily.

For most indications, therapeutic plasma exchange can be performed on an intermittent schedule using clotting factor deficient replacement fluid without the need for routine monitoring of the patient's hemostasis status. Daily treatments significantly reduce clotting factors; therefore, coagulation testing may be appropriate.

5

Do not routinely continue a series of apheresis procedures without a predefined objective goal, and stop the series if it is apparent that the goal cannot be reached or adverse effects outweigh potential benefits.

Apheresis procedures are performed sequentially until a predefined objective goal is reached. When the goal is either achieved or is determined to be unreachable the burden and potential adverse effects of performing additional procedures outweighs the potential benefits.

How This List Was Created

Recommendations were drafted by the ASFA Choosing Wisely Working Group, which consisted of nine society members from the major committees of ASFA. Guiding principles included a focus on frequent practices that should be questioned, are supported by evidence, free from harm, truly necessary and not duplicative of other procedures or tests. Nine draft statements were reviewed, rated and ranked, using a nominal group scoring approach, by 41 physician and allied health members representing a diverse cross-section of apheresis medicine practitioners and content experts. The top five draft recommendations, chosen by cumulative rating and ranking scores, were further refined before submission to the Board of Directors and the ABIM Foundation for external review. Recommendations were incorporated by the ASFA Choosing Wisely Working Group into the final list, which was ultimately approved by the Board of Directors for publication and distribution.

ASFA Choosing Wisely Working Group – (Committee representation)

Michael Linenberger, MD (Chair) – University of Washington/Fred Hutchinson Cancer Research Center
Joseph Schwartz, MD, MPH (Research Committee) – Columbia University Irving Medical Center
Sarita Joshi, MD (Communications Committee) – Cleveland Clinic Foundation
Meghan Delaney, DO, MPH (Clinical Applications Committee) – Children’s National Health System
Christine Fernandez, RN, MSN/Ed, OCN (Allied Health Committee) – Consultant
Laura Connelly-Smith, MBBCh, DM (JCA Special Issue Committee) – University of Washington/Fred Hutchinson Cancer Research Center
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Yvette Tanheco, MD, PhD, MS (Apheresis Physicians Committee) – Columbia University Irving Medical Center
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Sources

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About the ABIM Foundation

The mission of the ABIM Foundation is to advance medical professionalism to improve the health care system. We achieve this by collaborating with physicians and physician leaders, medical trainees, health care delivery systems, payers, policymakers, consumer organizations and patients to foster a shared understanding of professionalism and how they can adopt the tenets of professionalism in practice.



To learn more about the ABIM Foundation, visit www.abimfoundation.org.

About the ASFA

The American Society for Apheresis (ASFA) is the premier organization of physicians, scientists, and allied health professionals whose mission is to advance apheresis medicine for patients, donors, and practitioners through education, evidence-based practice, research, and advocacy. ASFA creates guidelines for the appropriate use of apheresis techniques, provides education for apheresis practitioners, and promotes research in apheresis medicine, as well as provides information for patients regarding apheresis procedures. For more information about ASFA, please visit www.apheresis.org.



For more information or to see other lists of Five Things Patients and Providers Should Question, visit www.choosingwisely.org.