Aim: To review and rationalise routine "group & save" (G&S) and "cross match" requests for patients admitted under general surgery with right iliac fossa (RIF) abdominal pain, reducing unnecessary and costly requests for patients who are unlikely to require transfusion.

Methods: A 4-cycle retrospective audit was performed of patients under 65 with RIF pain, admitted to a district general hospital. Trust guidelines were introduced following an initial survey (G&S should not be performed routinely in patients under 65 presenting with RIF pain). Audit cycles were completed after the introduction of trust guidelines, after further education to clinical staff and finally to check maintenance of practice.

Results: In the initial survey, 72% (97/136) patients had a G&S. Following introduction of Trust guidelines, 20% (24/130) patients had a G&S. In the third survey, 17% (8/47) had a G&S and in the final audit cycle 5% (2/39) had a G&S.

Conclusion: Introduction of Trust guidelines has reduced the rate of unnecessary G&S requests. This was further improved with re-education after the junior doctor handover and maintained 4 months thereafter demonstrating a change in practice.