

RECEIVING A BLOOD TRANSFUSION

WHAT HAPPENS DURING A BLOOD TRANSFUSION?

A needle will be inserted into a vein in your arm with I.V. tubing attached; then the blood product will be infused. Before starting the transfusion, a nurse or doctor will check your ID bracelet to properly identify you and the unit of blood sent by the laboratory blood bank.

A nurse will monitor your blood pressure, temperature, and pulse before, during and after the transfusion. This is done to make sure that you are not having a transfusion reaction. If during the transfusion you experience any of the following symptoms, tell the nurse or doctor as you may be having a reaction.

- * Fever/Shaking Chills
- * Back Pain/Chest Pain
- * Feeling Hot or Flushed
- * Difficulty Breathing or Feeling Uncomfortable
- * Pain where the needle is inserted
- * Nausea
- * Hives/Skin Rash

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WHAT ABOUT TRANSFUSION REACTIONS?

Blood transfusions are very safe and the risk of having a reaction to a transfusion is very small. Most transfusion reactions occur during or immediately after a transfusion; however, delayed reactions can take place 3-12 days after a transfusion. Common, temporary side effects can include bruising or mild pain at the needle site. A mild allergic reaction may cause fever or chills. Depending on the type of reaction, you may be given medicine such as acetaminophen (Tylenol) or diphenhydramine (Benadryl). A serious reaction is highly unlikely. If you have any symptoms (see the previous list), tell the doctor or nurse immediately.

A small number of patients can develop a blood antibody, which may interfere with future pregnancies or transfusions. If after returning home, you notice a change in urine color to pink, red, or brown, or notice a change in skin color to yellow, call your doctor immediately or call the emergency room or hospital clinic.

WHAT ARE THE CHARGES FOR A BLOOD TRANSFUSION?

Blood itself is a donated product; however, there are costs associated with testing, storage, and administration. A processing fee is charged to recover those costs. OBI has several donor benefit plans that in certain patients may help defray some medical costs associated with blood transfusion. Information about these programs can be obtained by visiting their website at www.obl.org or by calling 800-375-8778.

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INFORMATION ABOUT RECEIVING A BLOOD TRANSFUSION

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PATIENT INFORMATION ABOUT RECEIVING A BLOOD TRANSFUSION

BLOOD TRANSFUSIONS

YOUR PHYSICIAN HAS DETERMINED THAT YOU NEED A BLOOD TRANSFUSION

There are many reasons that patients need a blood transfusion and specific questions about the need for transfusions are best answered by your physician. A sample of your blood, obtained by inserting a needle into a vein in your arm, will be sent to the laboratory blood bank where a Medical Technologist will determine your blood type and find a unit of compatible blood. A doctor that specializes in Transfusion Medicine oversees this testing. This testing may be done several days before the transfusion or on the day of transfusion. It is important to tell the doctor or nurse if you have had a blood transfusion in the past so they can alert the blood bank.

There are different types of blood transfusions: red blood cells, platelets, plasma, or cryoprecipitate and the type of blood transfusion you receive is determined by your medical condition. For example, red blood cells are given to patients to help increase your oxygen carrying capacity as a result of Anemia.

ARE THERE BLOOD SUBSTITUTES? OR OTHER ALTERNATIVES AVAILABLE?

No, at this time there are no FDA-approved blood substitutes in the United States. In some cases it may be possible to donate your own blood for non-emergency use (elective surgery.) This type of blood donation is called AUTOLOGOUS. Since you are getting your own blood back, many infectious risks are eliminated, but other risks associated with transfusion remain.

It may be possible to arrange for blood donations from family members or friends. This type of blood donation is called DIRECTED DONATION. Directed donations have not been shown to be safer than blood from the volunteer blood supply. Unfortunately these types of donations can only be done at the Oklahoma Blood Institute Centers – the closest sites to Elk City would be Oklahoma City, Enid, or Lawton. For more information call OBI 800-375-8778 or www.obl.org.

A drug called Erythropoietin (EPO) has been used in patients with certain diseases to stimulate the patient's bone marrow to produce more blood; it is not a blood substitute and takes several weeks to work. Recent research has questioned the safety of this drug in certain patient populations.

WHAT HAPPENS IF I REFUSE TRANSFUSION?

There are many reasons why patients might be hesitant or scared to have a blood transfusion. Adults have the right to refuse a blood transfusion.

WHAT ARE THE INFECTIOUS RISKS OF HAVING A BLOOD TRANSFUSION?

All of the blood at Great Plains Regional Medical Center comes from volunteer blood donors who donate at the Oklahoma Blood Institute (OBI). In order for a blood donor to be accepted for donation, they must meet strict guidelines. These strict standards are established to provide the safest possible blood components.

All blood products are tested for Human Immuno Deficiency Virus (HIV, the virus that causes AIDS), Hepatitis B, Hepatitis C, Syphilis, West Nile Virus, and Human T Lymphotropic viruses (HTLV I/II).

The blood supply is safer than ever; however, every transfusion has a small risk. With current testing, the risk of HIV is approximately 1 in 2-4 million, Hepatitis C approximately 1 in 2 million, Hepatitis B approximately 1 in 1 million. For comparison, your risk of being hit and killed by a car is 1 in 20,000.

