

Blood Transfusion

A blood transfusion is when your doctor gives you blood through an IV line. A blood transfusion is used to replace red blood cells. Red blood cells are the cells in your body that carry oxygen to your organs. The blood transfusion can be given through an IV line in your arm, leg, or in your neck. There are many reason to give a blood transfusion such as if you have had surgery and you have lost blood during the surgery, if your red blood cells are being destroyed by your body, if your red blood cells are not being properly produced by your body or if you have certain medical diseases such as sickle cell disease or any chronic disease that may make it difficult for your body to make red blood cells.

<u>Preparation:</u> Your doctor may draw blood from you to determine what type of blood you should receive. Also, your doctor may need to know how much blood to give you. Once the specific type of blood for you is identified and the amount needed, the area where they will give you the transfusion is washed with antiseptic to kill any germs. You will most likely be in a bed of a chair while you receive the transfusion.

<u>Procedure:</u> Once the IV is started, the blood will be given slowly. The whole procedure will take about four hours for each pint of blood transfused. Under certain situations, your doctor may need to give the transfusion more quickly. There may be a little burning sensation in the IV as you receive the transfusion.

<u>Post Procedure:</u> After the completion of the transfusion, the IV will be removed, if necessary. You will be watched closely to make sure that you tolerated it well. You will be monitored closely to see if you develop any reaction to the transfused blood. After your doctor is sure that you tolerated it well, you may be allowed to resume your normal activity. Your doctor may need to draw blood a couple hours after the procedure to see if you may need more blood.

<u>Possible complications of Procedure:</u> All procedures, regardless of complexity or time, can be associated with unforeseen problems. They will be immediate or delayed in presentation. We would like to have a list so that you may ask questions if you are still concerned. These complications include but are not limited to:

- Hepatitis B and C transmission: Hepatitis B and C are viral illnesses that affect your liver. These
 conditions can lead to permanent liver failure and death. The risk of getting hepatitis B with one unit of
 blood transfused is one in 60,000, while the risk of getting hepatitis C with one unit of blood transfused
 is one in 100,000.
- HIV transmission: HIV is a disease that attacks your immune system. Currently, HIV is treatable with medications, but it is not curable and it is fatal. The risk of getting HIV with on unit of blood transfused is one in 720,000.
- Bacterial contamination: The risk of the blood being contaminated with bacteria is approximately one in 500,000.

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- Fatal hemolytic transfusion reaction and fatal acute lung injury: A fatal hemolytic reaction is like an allergic reaction to blood that is transfused and leads to death. The risk of this
- happening is one in 500,000. A fatal lung injury is like an allergic reaction in your lungs from being transfused that leads to death. The risk of this occurring is approximately one in 3,000,000.

Expectations of Outcome: With a blood transfusion, you should expect for your red blood counts to increase because of the transfused red blood cells given in the transfusion. This may improve some symptoms of your low red blood cells such as dizziness and lightheadedness. Although this effect may be long lasting, if you have a medical condition where you are not producing red blood cells or your body is destroying them, the effect may last for only a short while.

In order to best treat you in a life threatening emergency where blood and blood products would/ could save your life we ask you to consent to receiving such in an emergency before we can engage with you in the care process.

Patient:	
Patient Signature:	
Date:	
Witness:	