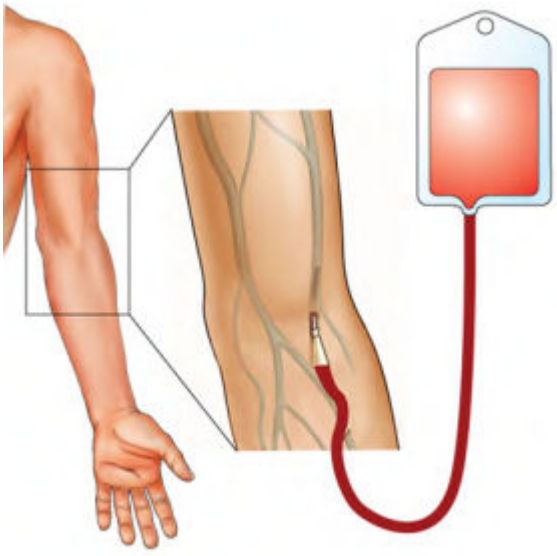
Blood Transfusion Information

WHAT IS A BLOOD TRANSFUSION?

A transfusion is the replacement of blood or some of its parts. Blood is made up of multiple cells which provide different functions.

- Red blood cells carry oxygen and are used for blood loss replacement.
- White blood cells fight against infection.
- Platelets control bleeding.
- Plasma helps clot blood.
- Other blood products are available for specialized needs, such as hemophilia or other clotting disorders.



BEFORE THE TRANSFUSION

Who gives blood for transfusions?

- **You** may be able to donate blood to be used at a later date on yourself (*autologous donation*).
- **Relatives** can be asked to donate blood. This is generally not any safer than if you have received blood from a stranger. The same precautions are taken to ensure safety when a relative's blood is donated.
- **Healthy volunteers** who are fully evaluated to make sure their blood is safe. This is blood bank blood.

Transfusion therapy is the safest it has ever been in the practice of medicine. Before blood is taken from a donor, a complete history is taken to make sure that person has no history of diseases nor engages in risky social behavior (examples are intravenous drug use or sexual activity with multiple partners). The donor's travel history is screened to minimize risk of transmitting infections, such as malaria. The donated blood is tested for signs of infectious diseases, such as HIV and hepatitis. The blood is then tested to be sure it is compatible with you in order to minimize the chance of a transfusion reaction. If you or a relative donates blood, this is often done in anticipation of surgery and is not appropriate for emergency situations. It takes many days to process the donated blood.

RISKS AND COMPLICATIONS OF BLOOD TRANSFUSION

Although transfusion therapy is very safe and saves many lives, the main dangers of transfusion include:

- Getting an infectious disease.
- Developing a transfusion reaction. This is an allergic reaction to something in the blood you were given. Every precaution is taken to prevent this.

Because of these small risks, you may be asked to sign a consent form saying that you understand these risks and accept them. The decision to have a blood transfusion has been considered carefully by your caregiver before blood is given. Blood is not given unless the benefits outweigh the risks.

AFTER THE TRANSFUSION

- Right after receiving a blood transfusion, you will usually feel much better and more energetic. This is especially true if your red blood cells have gotten low (*anemic*). The transfusion raises the level of the red blood cells which carry oxygen, and this usually causes an energy increase.
- The nurse administering the transfusion will monitor you carefully for complications.

HOME CARE INSTRUCTIONS

No special instructions are needed after a transfusion. You may find your energy is better. Speak with your caregiver about any limitations on activity for underlying diseases you may have.

SEEK MEDICAL CARE IF:

- Your condition is not improving after your transfusion.
- You develop redness or irritation at the intravenous (IV) site.

SEEK IMMEDIATE MEDICAL CARE IF:

Any of the following symptoms occur over the next 12 hours:

- Shaking chills.
- You have a temperature by mouth above 102° F (38.9° C), not controlled by medicine.
- Chest, back, or muscle pain.
- People around you feel you are not acting correctly or are confused.
- Shortness of breath or difficulty breathing.
- Dizziness and fainting.
- You get a rash or develop hives.
- You have a decrease in urine output.
- Your urine turns a dark color or changes to pink, red, or brown.

Any of the following symptoms occur over the next 10 days:

- You have a temperature by mouth above 102° F (38.9° C), not controlled by medicine.
- Shortness of breath.
- Weakness after normal activity.
- The white part of the eye turns yellow (*jaundice*).
- You have a decrease in the amount of urine or are urinating less often.
- Your urine turns a dark color or changes to pink, red, or brown.

Document Released: 11/08/2005 Document Re-Released: 03/14/2011
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