

Giving your consent

You should make sure you understand the reasons, risks and benefits when you are asked to give your consent for a transfusion. If you have any objections it is extremely important to discuss them with your doctor. In an emergency it may not be possible to obtain your consent for a transfusion, but the reasons should be explained to you when you are recovering.

When you have a blood transfusion

When you are ready to receive your blood transfusion you will be asked to confirm your identity. This is for your safety because if the wrong blood (meant for someone else) is given to you then this could cause serious medical problems. Staff will follow strict checking procedures before and during every transfusion. If you feel unwell during a transfusion, you should tell staff immediately.

What can we all do to make sure that a safe supply of blood is available?

It is important that healthy Australians donate blood. This helps ensure a safe and adequate blood supply, which saves many lives each year.

BLOOD TRANSFUSION

checklist

- Do you understand why you need a blood transfusion?**
Your doctor should explain why a transfusion has been recommended.
You can ask about your haemoglobin level.
- Have the risks of transfusion been explained?**
The risks and benefits of transfusion for your condition should be clearly explained.
- Have alternatives been discussed?**
Alternatives to transfusion should always be considered and discussed with you by your doctor.
- Have all your questions been answered?**

Copies of this brochure are available from:

www.transfusion.com.au
www.cec.health.nsw.gov.au

Translated brochures available from:

www.mhcs.health.nsw.gov.au



NSW HEALTH



Disclaimer: This fact sheet is for your educational purposes only. It should not be used to guide and/or determine actual treatment choices or decisions. Any such decisions should be made in conjunction with advice from your treating practitioner. Please consult with your doctor or other health professionals to make sure this information is right for you.

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Blood transfusion

Answers to some common questions for you and your family.



When is a blood transfusion necessary?

Blood transfusion is important in the treatment of many medical problems such as cancer and blood disorders, and in the treatment of some injuries and major surgical procedures when blood loss has occurred.

What is a blood transfusion?

A blood transfusion is when donated blood is given to you intravenously, directly into your bloodstream. Usually it is a component of blood which is given.

Red blood cells contain haemoglobin which carries oxygen to your body tissues and organs. Your doctor will decide if you need a transfusion by considering the cause and severity of your anaemia (low haemoglobin), your medical condition and any symptoms.

Generally, if your haemoglobin is:

- ♦ **below 70 g/L (grams per litre):** a transfusion is often needed
- ♦ **between 70 and 100 g/L:** transfusion may be necessary
- ♦ **above 100 g/L:** transfusion is not usually needed.

Platelets help blood to clot. A platelet transfusion may be needed when your platelet numbers are too low or when your platelets don't work properly.

Plasma works with platelets to clot blood and seal wounds. It is often used in emergencies to help stop bleeding.

Where does transfusion blood come from?

Blood is collected only from suitable volunteer donors by the Australian Red Cross Blood Service. In Australia we take many precautions to ensure blood is as safe as possible. Donated blood is extensively tested to check its safety, and blood that fails these tests is discarded.

What are the risks?

Although Australia's blood supply is very safe, blood transfusion is not risk free, and complications can occur, as they can with all medical procedures.

- ♦ Severe reactions to blood transfusions are very uncommon, but can result in major consequences and rarely, even death.
- ♦ Immune or allergic reactions may occur. There may be an increased risk of post-operative infection and longer length of hospital stay for surgical patients.
- ♦ Mild skin reactions or fever occur occasionally (one to two reactions in every hundred transfusions). Patients who receive regular transfusions are more at risk of such reactions.
- ♦ Despite screening of all blood donations, the risk of transferring infectious agents (including hepatitis virus, HIV and bacteria) cannot be ruled out completely. This risk is extremely low.

Alternatives to blood transfusion

As blood transfusion is not risk free, it is important for you and your doctor to consider alternatives to transfusion, and ways of reducing the amount of blood used. Alternatives include:

- ♦ detecting and treating anaemia before planned surgery
- ♦ collecting blood lost during surgery and returning it back to you
- ♦ new procedures and medicines to minimise blood loss.

Providing blood for yourself (autologous collection)

Patients sometimes ask if they can give their own blood before surgery, to be used instead of donor blood. Although autologous collection and transfusion may sound risk-free, it is not. Collection of your own blood before surgery is therefore not generally recommended except in special situations, e.g. rare blood groups when it may be difficult to obtain matched blood.