



## *A Patient's Guide to Blood Transfusion*

**Adapted from a brochure developed by the California Department of Health Services**

**August 1999**

**If you need blood** — you have several options. These options may be limited by time and health factors. You may need to check with your insurance company regarding its reimbursement policy related to blood transfusion. Most gynecologic surgeries do not require blood transfusion. Although you have the right to refuse a blood transfusion, this decision may hold life-threatening consequences. If you have questions about your options relating to blood transfusion, please ask your physician.

### **Using your own blood – Autologous Donation**

Using your own blood can minimize the need for transfusion with donor blood. Using your own blood will reduce, but not eliminate, the risk of transfusion-related infections and allergic reactions. Autologous blood donations are not an option for all patients. You may want to ask your doctor if it is safe for you to donate. Autologous blood collections may not be available at the hospital in which your surgery will be performed. Ask your doctor about the availability of these procedures, and if autologous donation is appropriate for you.

### **Donating BEFORE Surgery**

Blood banks can draw your blood and store it for your use. This process usually is performed for a planned surgery. Blood can be stored for only a limited period of time, so coordinating the donations with the date of surgery is an important consideration.

### **Donating DURING Surgery**

Immediately before surgery, your doctor may be able to remove some of your blood and replace it with other fluids. After surgery, the blood that was removed may be returned to you. In addition, the surgeon may be able to recycle your blood during surgery. Blood that normally is lost and discarded during surgery may be collected, processed and returned to you. A large volume of your blood can be recycled in this way. Either of these methods may minimize or eliminate the need to be transfused with someone else's blood.

### **Donating AFTER Surgery**

Blood that is lost after surgery may be collected, filtered, and returned to you. This process may minimize or eliminate the need to be transfused with someone else's blood.

### **Using Someone Else's Blood**

If you choose not to donate your own blood, or if more blood is required than expected, you will receive blood from community or designated donors, if necessary.

### **Community Donors**

Hospitals maintain a supply of community donor blood to meet transfusion needs. Volunteer (unpaid) community blood donors are screened by a thorough medical history, and then tested with the most accurate technology available. Although blood and blood products never can be 100% safe, the risk is very small. As of 1998, infection with HIV (the virus that causes AIDS) occurs less than once per 500,000 (half a million) units of blood transfused. Hepatitis C infection occurs about once per 100,000 units, and Hepatitis B occurs about once every 60,000 units. Other infections are transmitted much less often.

### **Designated Donors**

Although the blood supply today is very safe, some patients prefer to receive blood from people they know – “designated (or directed) donors.” There is no medical evidence that this blood is safer than that from volunteer donors. In some cases it may be less safe because donors known to the patient may not reveal embarrassing information about their personal history, assuming the blood tests will detect any infection. Since tests do not always detect viruses, blood donated by someone whose recent behavior put them at risk of HIV or other viruses could pass the screening measures, and transmit disease to a patient.

Designated donors must meet the same requirements as community donors. Advance notice is required to accommodate a request for designated donors, as additional processing may be required.

If you have additional questions about your options relating to blood transfusion, please refer these questions to your physicians. Information also can be obtained by calling your local community blood center or hospital blood bank. Doctors and other health care professionals who work in blood centers are experts in blood transfusion therapy and may be helpful in answering your questions.

This brochure is provided as a source of information and is not to be considered a replacement for the Informed Consent process prior to the transfusion of blood.

This brochure was developed by the

**California Department of Health Services**

714/744 P Street, Sacramento, CA 95814

In partnership with the

**Medical-Technical Advisory Committee of the Blood Centers of California**

Central Office – 3621 Willow Street, Santa Inez, CA 93460

For information about its contents, please call Laboratory Field Services

(510) 873-6327

**Distributed by the Medical Board of California**

**If you are interested in setting up an appointment to donate blood for yourself (Autologous Donation) or to have someone else donate blood for you (Designated Donor) please call the American Red Cross for more information at (408) 577-2000 or (800) 669-4348.**

After you schedule an appointment, your physician must FAX a signed “Special Collection Order” form to the American Red Cross (ARC) at (408) 577-7700. Prepayment to the ARC is required in most instances. You may call the ARC for fees. Units must be drawn at least 7 days prior to its need. Please call the ARC if you are unable to make your appointment or if the surgery time has been changed.