Donating Blood for Surgery

Although not all surgeries require a blood transfusion, if you do need blood, you may want to be aware of the options available to you.

First, you should know that you have the right to refuse a blood transfusion; however, you should also know that this decision may be life-threatening.

Second, the options available to you may be limited by time and by your specific health condition.

Using your own blood: "Autologous donation"

Using your own blood is referred to as "autologous donation," and it can minimize the need for using donor blood. Autologous donation will reduce-but not eliminate-the risk of infections and allergic reactions that can occur when using donor blood. Autologous blood donations are not an option for all patients, however. You may want to ask your doctor if it is safe for you to donate.

\mathcal{D} onating before surgery

Blood banks can draw your blood and store it for your use. This process usually is performed for a planned surgery. Your blood is kept cold and can be used for 42 days. Keep in mind that blood can be stored for only a limited period of time, so coordinating the donations with the date of surgery is an important consideration. Your doctor can set this up with the Blood Bank of Delmarva.

$\mathcal{D}_{ ext{onating during surgery}}$

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. This may minimize or eliminate the need to be transfused with someone else's blood

\mathcal{D} onating 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-and if your doctor determines that more blood is required for your health-you will receive blood from donors.

Christiana Care gets most of the blood we need from the Blood Bank of Delmarva, which runs many blood bank centers (where you go to give blood) in Delaware and Maryland. Blood is donated by a volunteer who meets all the rules that make sure their blood is safe to use.

All blood is tested to see the type (A, B, O), antibodies (things that could make you sick), and certain illnesses, like syphilis and viruses like AIDS and hepatitis. Once the blood gets to the hospital, it is tested to make sure the blood type (A, B, O) matches your blood type.

Risks

Your doctor is aware of all the risks of giving blood to you and will make sure that you get only what is needed for your care. With all the testing done when the blood is given at the blood bank, the risks of getting blood is less than the risks to you if you do not get blood when you need it.

Here is what we know of risk for getting blood in the United States: *Viral Risks*

• HIV	1 in 2,300,000
Hepatitis B	1 in 220,000
Hepatitis C	1 in 1,800,00
• HTL	1 in 2.900.000

Getting a virus can happen even with all the strict rules of donor testing that are used.

The largest risks when you get blood are written below:

Acute Hemolytic Reaction

• 1 in 50,000

Bacterial contamination in red cells

• 1 in 30,000

Anaphylaxis

• 1 in 30,000

Bacterial contamination in platelets

• 1 in 3,000

Delayed Hemolytic Reaction

• 1 in 2,000

Transfusion Related Lung Injury

- 1 in 1,500 1 in 190,000
- Allergic reaction or hives
 - 1 in 100

Fever

• 1 in 500

Blood is given as red cells (PRBC), platelets, frozen plasma or cryoprecipitate (this helps your blood clot).