

CHILDREN RECEIVING A TRANSFUSION

A guide for caregivers

WHAT IS A BLOOD TRANSFUSION?





A blood transfusion involves blood being given through a tube into the bloodstream.

Transfusion has been recommended because it is the best option for your child at this point.



WHICH BLOOD PRODUCT MIGHT MY CHILD RECEIVE?

After blood is collected from a donor it is separated into parts so your child only receives the part that they need.




 RED BLOOD CELLS	 PLATELETS	 FRESH FROZEN PLASMA CRYOPRECIPITATE	 PLASMA PRODUCTS
<p>Carry oxygen around the body</p> <ul style="list-style-type: none"> A low number of red blood cells results in anaemia. Some causes of anaemia include blood loss, increased red cell breakdown and reduced red cell production. 	<p>Help to stop bleeding by forming a clot</p> <ul style="list-style-type: none"> Low platelet count can be due to too few being made, too many being used or too many being destroyed. Some causes include cancer treatment, infection and antibodies. 	<p>Liquid part of blood containing important plasma proteins</p> <ul style="list-style-type: none"> May be required in acute bleeding where proteins in the plasma are reduced. 	<p>Concentrated blood proteins</p> <ul style="list-style-type: none"> Albumin helps maintain fluid levels. Immunoglobulins help the immune system. Clotting factors are for treating specific bleeding problems.

ARE TRANSFUSIONS SAFE?

The blood for transfusion is collected by the Australian Red Cross Blood Service from voluntary, unpaid donors.

The blood supply is one of the safest in the world and most children will have no complications during or after their transfusion.

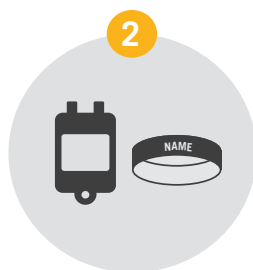
Although transfusions are generally very safe, there are some associated risks. However, precautions are taken to avoid any complications. There are three key risks to be aware of:

 HAVING A REACTION	 CATCHING AN INFECTION	 RECEIVING THE WRONG BLOOD PRODUCT
<ul style="list-style-type: none"> Reactions are uncommon and can range from mild to severe. Mild reactions are the most common and include a rash or slight fever. Severe reactions include breathing difficulties, high fever and severe allergy (anaphylaxis). Your child will be carefully monitored. Alert the nursing staff if you have any concerns about your child during the transfusion. 	<ul style="list-style-type: none"> In Australia, blood is carefully screened for infections. This includes screening donors and testing the blood after it has been donated. Risk of catching any diseases such as Hepatitis C or HIV is less than one in a million. 	<ul style="list-style-type: none"> This occurs rarely (usually a checking error). This is prevented by multiple checks in the laboratory and at the bedside prior to beginning transfusion. It is important that your child is wearing an identification band throughout the process.

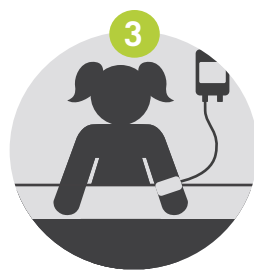
HOW IS BLOOD GIVEN?



1
Your child will need a small plastic tube placed into a vein




2
The blood product will be carefully checked to make sure it matches your child's blood




3
The transfusion will begin



4
Your child will be carefully monitored

 The transfusion should take up to four hours, but usually less.

 We usually observe no change in the child during their transfusion.


 If you have any concerns about your child at any stage of the process, alert nursing staff immediately.

DO I NEED TO GIVE CONSENT FOR A BLOOD TRANSFUSION?

Yes, consent is necessary prior to your child being given a transfusion.

Consider the following statements and if you have any doubts, please ask your clinical team.

- ✓ I understand why transfusion has been recommended and other possible options for treatment.
- ✓ I am aware of the expected benefits of a transfusion for my child.
- ✓ I am aware of the potential risks and side effects.
- ✓ I am aware of which blood products will be transfused to my child.
- ✓ I am aware of how the transfusion will be given and how long it will take.

 In an emergency, there may not be time to discuss your child's transfusion and obtain your consent. However, the reasons for the transfusion will be explained to you as soon as possible.

FREQUENTLY ASKED QUESTIONS

CAN I DONATE BLOOD TO MY CHILD?	WHAT WOULD HAPPEN WITHOUT A TRANSFUSION?	WILL THIS TRANSFUSION AFFECT MY CHILD IN THE FUTURE?
<p>The risk of blood from donors provided by the Blood Service is extremely low, so parents' blood is not used.</p> <p>In addition, there are some increased risks of rare transfusion reactions when children receive blood from relatives.</p>	<p>A transfusion is only recommended if medically necessary. For example, red cells carry oxygen and once the anaemia becomes severe, your child's body may not be getting enough oxygen. This could lead to heart, kidney or brain problems. Please talk with your clinical team about any questions or concerns.</p>	<p>From what we know, there are limited long-term effects. If your child needs a transfusion in the future, remember to mention that they have had one before as it may influence which blood is given.</p>

To find out more visit mytransfusion.com.au

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This information was compiled by the Australian Red Cross Blood Service in collaboration with Women's and Children's Hospital Network (SA), John Hunter Children's Hospital (Hunter New England Local Health District) and The Royal Children's Hospital, Melbourne.