



## Blood transfusions

A blood transfusion is when blood or one part of the blood is dripped from a special bag into the blood stream of the person receiving the transfusion. A blood transfusion can take up to four hours. The blood comes from a "Blood Bank" and is usually from a donor (someone who gives blood). Sometimes, if the transfusion is planned, people store their own or a family members blood in advance which can be used for the transfusion.

### **Why would my child need a blood transfusion?**

Blood transfusions are given to replace blood that has been lost during surgery, after an accident or when the body can't make enough blood itself.

### **What are the different parts of blood and what do they do?**

Blood can be separated into three main parts:

- Red blood cells carry oxygen around the body and give blood its red colour. Sometimes written as RBC.
- Platelets cells that help the blood to clot.
- Plasma – the fluid part of blood. Contains clotting factors that work with platelets to stop bleeding.

Your child will only be given the part of blood that they need.

### **How will I know if my child needs a blood transfusion?**

If your child might need a blood transfusion, your doctor will discuss the following things with you first:

- Why they think your child needs a transfusion.
- The benefits of your child having a blood transfusion and any risks.
- Any possible alternatives.
- You can ask questions and discuss any concerns with the doctor before you agree to a blood transfusion for your child. In an emergency, the doctor may have to give your child a blood transfusion urgently. There may not be time to discuss this with you first.

### **Who does the blood come from?**

In Australia, blood comes from people who volunteer to 'give blood'. Their health is checked carefully before they donate blood. The blood they donate is tested carefully before being given to someone.

## **Can my child be given my blood or blood from another family member?**

This is known as 'directed donation'. It is possible when the donor's blood group matches your child's blood group. It is only possible if your child does not need blood urgently. The risk of infection with blood from you or someone in your family is similar to the risk with volunteer's blood. Also, there are increased risks of some rare side effects when blood is donated from relatives. If you want to know more about directed donation, talk to your child's doctor. The doctor can arrange for you to speak with a blood specialist.

## **Is the blood checked to see if it is safe?**

The Australian Red Cross Blood Service has very high safety standards and tests all blood donations. Testing is done to detect infections that can be carried by blood. The most important infections are Hepatitis B, Hepatitis C and HIV (the virus that causes AIDS). The risk of getting Hepatitis or HIV from volunteers' blood is very, very small – less than 1 in a million (in fact, you are more likely to be struck by lightning).

## **Are there any alternatives?**

Sometimes, when the blood levels of the red blood cells, platelets and plasma are not too low, medicine may be enough to help the body replace its own blood. During some surgical procedures, the child's blood can be collected during the procedure, washed and returned to them. Your child's doctor will explain if there are any alternatives to blood transfusion that may be suitable for your child.

## **What to expect when your child has a transfusion**

First, your child will need a blood test to match their blood type to a suitable bag of blood in the 'blood bank'. Before your child receives the blood transfusion, two nurses will check to make sure the blood bag is the correct one for your child and check that the details on your child's wristband exactly match those on the blood bag. The transfusion will be dripped through an IV (a small tube that goes into a vein) or a catheter into your child's blood stream. Usually this is in the arm.

## **Are there any side effects?**

Most children feel no different at all during their transfusion. However a few children get a slight fever, headache or a rash. These can be treated with medication so your child is more comfortable. Severe reactions to blood transfusions are extremely rare. Your child will be carefully monitored during the transfusion. If your child feels unwell during a transfusion, tell the nurse immediately.

## Key points to remember about blood transfusion

- Unless it is an emergency, your doctor will speak with you about why your child needs a blood transfusion before it is given.
- Talk to your doctor or nurse about any questions or concerns you have.
- Blood is carefully tested so that the risk of getting an infection from it is very, very small.
- Most children feel comfortable and no different at all during the transfusion.

## For more information

- **Australian Red Cross Blood Service** [www.giveblood.redcross.org.au](http://www.giveblood.redcross.org.au)
- **RCH Transfusion Nurse**, Royal Children's Hospital  
Tel 03) 9345 5522, pager 4948

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