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| Patient blood management for consumers |
| Helping your blood work for you |

Patient blood management (PBM) is the new standard of care. Standards of care ensure that everyone receives safe, high-quality and evidence-based treatment.

PBM focuses on **actions to reduce or avoid the need for a blood transfusion**.

If you need a transfusion, we will make sure you only receive what you really need, and that the transfusion is given safely.

## PBM is best practice

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| **Research** tells us you may have: | | PBM can reduce: | | PBM requires a **team approach** involving**:** | |
|  | * fewer complications * a faster recovery * less time in hospital. |  | * the need for blood transfusion * the risks related to blood transfusion * healthcare costs. |  | * you and your carers * your doctors, nurses and pathology staff. |

## PBM focuses on three main areas

### Identify and manage anaemia

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|  | Anaemia (low Hb) is common – **30 per cent of patients** going to surgery have anaemia. |
|  | Anaemia and low iron levels can **increase your chances** of needing a blood transfusion and other complications. |
|  | If your Hb or iron levels are low, you may need to take **iron tablets** or have an **iron infusion**. |
|  | **For best results**, anaemia or iron **treatment should start four to six weeks** before you have surgery. If your surgery is more urgent, you may need an **iron infusion**. |
|  | You may need further tests if there is **no obvious reason** for your anaemia or **low iron levels**. |

### Minimise the risk of bleeding

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|  | **Tell the doctor about** any medicines you are taking, prescribed or over-the-counter, including **natural and herbal medicines**, as some can affect clotting and bleeding. |
|  | If your doctor wants you to take a blood test, ask if the test is really needed. **Taking less blood** for tests can **reduce the amount of blood lost** and can help reduce the need for a blood transfusion. |
|  | In addition to your doctor paying **careful attention to reduce bleeding during surgery,** they may use **new techniques**, giving you back the blood you lose and the use of some medications to **reduce bleeding during the procedure** such as tranexamic acid. |

### Tolerating anaemia (low Hb)

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|  | After surgery, you will be **carefully monitored** to check for and stop any bleeding. |
|  | You may still need a blood transfusion if you have signs and symptoms of anaemia or significant bleeding. Before having a blood transfusion, **the doctor will assess your condition**. You should only receive a blood transfusion if the risk of the transfusion is less than the risk of you becoming unwell due to anaemia. |
|  | If you need a blood transfusion, the doctor should only order one unit of blood, and **assess your condition** again to see if you need any more. This may mean having another blood test and **being examined by the doctor**. |

## Find out more

Your doctor can tell you more about how PBM practices can help to reduce or prevent you needing a blood transfusion.

You can also find out more about transfusions on the Australian Red Cross Lifeblood’s [Mytransfusion website](https://mytransfusion.com.au/avoid-transfusion-1) <https://mytransfusion.com.au/avoid-transfusion-1>.

The National Blood Authority (NBA) website has [more information and videos](https://www.blood.gov.au/patients) <https://www.blood.gov.au/patients>.

## References

Australian Commission on Safety and Quality in Health Care 20190, ‘[What is patient blood management?](https://www.safetyandquality.gov.au/national-priorities/pbm-collaborative/what-is-patient-blood-management#:~:text=PBM%20views%20a%20patient%27s%20own,of%20all%20other%20body%20systems)’, <https://www.safetyandquality.gov.au/national-priorities/pbm-collaborative/what-is-patient-blood-management#:~:text=PBM%20views%20a%20patient%27s%20own,of%20all%20other%20body%20systems>.

Australian Red Cross Lifeblood 2019, [‘PBM overview’](https://transfusion.com.au/node/2364), <https://transfusion.com.au/node/2364>.

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