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## WHAT IS A BLOOD TRANSFUSION?

A transfusion is a medical procedure, ordered by a physician, to correct a deficiency of blood or its parts. For example, transfusions might be ordered for patients with:

- Bleeding due to surgery or an accident
- Chronic blood Loss
- Inherited blood disorders
- Leukemia
- Bone marrow transplantation

Blood is made up of several parts called "components":

- Red cells - Carry oxygen to the tissues
- Platelets - Promote blood clotting
- White cells - Fight infection
- Plasma (the fluid part of blood) - Contains proteins important for blood clotting

A person requiring a transfusion may use whole blood or blood components. In both cases, the whole blood or blood components are transfused directly into the bloodstream.

## HOW DOES THE PROCEDURE WORK?

Once a physician has determined that a transfusion may be required, a small amount of blood will be drawn for testing. Test results are used to ensure that the patient's blood is compatible with the donor's blood. After completion of this testing, which generally takes 1-2 hours, the blood is delivered to the physician or hospital for the transfusion. If the blood is transfused during surgery, it is likely the patient will be under anesthesia and not aware of the process. However, a transfusion is a simple procedure, often done while the patient is awake. Most commonly a medical professional will insert a needle into a vein under the skin, and the blood will be infused over the course of one to three hours. The procedure is virtually painless and requires only restriction of movement during the process.

## ARE ANY ADVERSE HEALTH EFFECTS ASSOCIATED WITH TRANSFUSIONS?

Most transfusions are associated with no adverse effects. However, all medical treatments carry some risk. Some of those associated with blood transfusions include:

Hepatitis - At least two forms of hepatitis, an inflammation of the liver, can occur following transfusions: hepatitis B and non-A/non-B hepatitis. Donor screening and testing reduce the risk of hepatitis as much as possible, but cannot totally eliminate it. One reason is that hepatitis can be transmitted by people who appear to be perfectly healthy and who have no known history of having had the disease. The risk of getting hepatitis after transfusion is estimated to be approximately 1:63,000-103,000 units of blood. Hepatitis that occurs after transfusion is usually so mild that it is not detected. If patients become ill, they generally recover within a few

weeks. Only rarely may serious liver disease result.

Allergic reactions: Occasionally patients develop hives or chills and fever after a transfusion. These reactions occur in less than 5% of transfusions, are usually not serious, and can be treated effectively by a physician.

### **WHAT ARE THE CHANCES OF GETTING AIDS FROM A TRANSFUSION?**

The risk of exposure to the AIDS virus as the result of transfusion is very small. Blood from donors who have been exposed to the AIDS virus can transmit the infection. However, the donor screening and laboratory testing procedures now used for all donations are very effective in identifying blood capable of transmitting the AIDS virus. The risk of contacting HIV (the virus that causes AIDS) is approximately 1:493,000 units of blood.