Babies receiving a blood transfusion

Having a baby in hospital is a difficult time for everyone in the family. This information leaflet has been prepared to help explain what to expect if your baby needs to receive blood as part of their treatment.

Like all medical treatments, a blood transfusion should only be used when really necessary. The decision to give a blood transfusion to a baby is only made after careful consideration. Your baby’s doctor will balance the risk of your baby having a blood transfusion against the risk of not having one.

Your baby’s doctor will explain why your baby needs a blood transfusion and will discuss any alternative treatments available. It is important to understand why a transfusion is required and that you have an opportunity to ask any questions.

In an emergency, it may not be possible to discuss all options at the time. If this happens, the doctor will talk with you about the transfusion as soon as they can.

Why might your baby need a blood transfusion?

Newborn babies often become anaemic (short of blood), particularly if they are born early. This may be because of medical problems, or because babies who are unwell require a large number of blood tests to monitor their progress and the blood needs to be replaced.
If your baby needs an operation, a blood transfusion may be needed to replace any blood lost during surgery.

For medical reasons, sometimes your baby may need other blood components, such as plasma, platelets or immunoglobulin. If this is the case, your doctor or nurse will discuss this with you in more detail.

**What can be done to reduce my baby’s need for a blood transfusion?**

- It is routine practice to delay the clamping of the umbilical cord so that the baby receives as much of their own blood as possible.
- Every effort will be made to reduce the number of blood samples taken from your baby.
- Babies born under or around 34 weeks are prescribed iron supplements and vitamins from four weeks of age to help them make their own red blood cells.

**How is blood given?**

A blood transfusion is given through a tiny tube directly into a vein. This is known as a drip. The blood is usually given through the drip via a syringe attached to a pump. Blood is administered safely over a period of up to four hours.

Should your baby need more than one transfusion, as a safety measure every effort will be made to minimise the number of donors who provide blood. As babies only need a small amount of blood at a time,
your baby could get up to four transfusions from one donor.

How will my baby feel during the transfusion?

Most babies will not feel any different during the blood transfusion. Nursing staff will closely observe and monitor your baby throughout the procedure. Reactions to blood transfusions are rare and staff are trained to recognise these, should they occur.

Can I donate blood for my baby?

No. This is a common question but there are good reasons why this is not done. There is an increased risk of some types of serious reactions following blood transfusions from relatives.

Are transfusions safe?

Yes. The risk that a blood transfusion will make your baby ill is very low. Transfusions can be life-saving but no medical treatment is completely risk free.

One of the most important ways of achieving a safe transfusion is to make sure your baby gets the right blood. To ensure this happens, staff carry out careful identification checks of both your baby and the blood he/she is to be given. This is why it is important that your baby wears an identification band.

If you decide to change your baby’s name for any reason, it is important to tell your doctor or nurse, so that your baby’s records can be updated.
The likelihood of getting an infection from a blood transfusion is very low. Blood donors are carefully selected and their blood is tested to make sure it is suitable for transfusion.

The chance of a blood donation infected with hepatitis B, hepatitis C or HIV entering the UK blood supply has been estimated at less than one in a million donations.*

**Will a blood transfusion affect blood spot screening?**

A blood transfusion can affect the blood spot screening test (which is offered when your baby is around five days old). Generally, if a blood transfusion is needed, a blood spot will be taken beforehand and stored. A further blood spot will be taken 72 hours after the blood transfusion.

Sometimes a routine blood spot is taken and stored when babies are admitted to either an intensive treatment or high dependency unit. This is in preparation for the possibility that a blood transfusion may be required.

More detailed information on blood spot screening is available at [www.nhsinform.co.uk](http://www.nhsinform.co.uk)

**Further questions?**

Please tell your baby’s doctor or nurse about any concerns you have, no matter how trivial you think they may be.

If you are interested in finding out more about transfusion and have access to the internet, you might find the following websites useful:

Scottish National Blood Transfusion Service  
www.scotblood.co.uk

Healthcare Improvement Scotland  
www.healthcareimprovementscotland.org

British Blood Transfusion Society  
www.bbts.org.uk

Handbook of Transfusion Medicine  
www.transfusionguidelines.org.uk

Serious Hazards of Transfusion  
www.shotuk.org

National Patient Safety Agency  
www.npsa.nhs.uk

This publication can also be made available in large print, Braille (English only), audio tape and in different languages. Please contact nss.communications@nhs.net for further information.

The Scottish National Blood Transfusion Service is part of NHS National Services Scotland.

This leaflet was produced in collaboration with Princess Royal Maternity Hospital, NHS Greater Glasgow and Clyde.
Complete the label below, peel off and place securely in the patient’s notes or transfusion care pathway in the appropriate section.

Hand the leaflet to the parent/carer/guardian.

**NHSScotland; Blood Transfusion**
I have discussed the need for transfusion with:

..............................................................................
Name of parent/carer/guardian*

According to guidelines blood transfusion is indicated  Y  N

This leaflet has been given to the parent/carer/guardian  Y  N

Possible alternatives to transfusion have been discussed  Y  N

Does the parent/carer/guardian agree to transfusion?  Y  N

Signature ..................................................

Print Name ..............................................

Designation .............................................

Date .....................................................

This label should be signed by a member of the clinical team informing the parent/carer/guardian of transfusion.

**Remember - Benefits, Risks, Alternatives**

* Please delete as appropriate.