TRANSFUSION OPTIONS

A GUIDE FOR THE JEHOVAH’S WITNESS COMMUNITY
How do I make an appointment?

I have more questions. Who do I call?

Can I give blood for my own operation?

Do I have options for my own transfusion?

What will happen during surgery? How long will it take?

Do I have enough time to make my own choices?
**PERMITTED PROCEDURES AND BLOOD-DERIVED PRODUCTS PROVIDED BY NYBC**

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<th>PROCEDURES/PRODUCTS</th>
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<td>Specific components of your blood are removed by circulating your blood through a device specific for this purpose. The most common procedure performed is plasma exchange, where your plasma is removed and usually replaced with a plasma protein fraction (such as albumin, immunoglobulins, cryoprecipitate, clotting factors)</td>
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<td><strong>Blood Stem Cell Collection</strong></td>
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<td><strong>Plasma-Protein Fractions</strong></td>
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<td>To treat various medical problems involving specific proteins, such as loss of function, bleeding, and specific immune responses.</td>
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**PERIOPERATIVE BLOOD RECOVERY (PBR) (ALSO REFERRED TO AS PERIOPERATIVE AUTOLOGOUS TRANSFUSION OR PAT)**

Perioperative Blood Recovery (PBR) is a technique used to collect autologous blood shed during surgery for reinfusion into the patient, with the goal of minimizing the need for allogeneic blood transfusion. PBR collects blood from the surgical field, washes and concentrates the blood to remove debris and concentrate the blood (to a Hct of 50-60%), then the red blood cells are infused to the patient. In general, the blood needs to be transfused within six hours from the start of collection. PBR collection can continue post-operatively as needed. Each processing procedure requires 300-500 mL of collected blood, is completed in 5-10 minutes, or can be performed in a continuous manner for Jehovah’s Witness patients.

**BLOOD BANKING TERMINOLOGY**

**Albumin** The major fraction derived from plasma, used to treat low albumin levels secondary to disease, shock, and severe burns.

**Allogeneic (al-low-gen-AY-ick) Blood** Blood from someone else.

**Antibodies** Proteins in the body produced in response to foreign substances and needed to fight infections.

**Autologous (aw-TOL-o-gus) Blood** Your own blood.

**Blood Donation** The process of giving blood. The volume of a typical whole blood donation is approximately one pint (500 mL). Specific components can also be donated.

**Blood Type (Blood Group)** An inherited characteristic based on the presence or absence of A and B substances on the surface of red blood cells. The four major blood types are A, B, AB, and O. Transfused blood must be blood type compatible.

**Clotting Factors** Proteins isolated from plasma that are necessary for control of bleeding.

**Component** Whole blood is separated into components so patients can be transfused only with what they need. The major components are red blood cells, plasma, and platelets.

**Crossmatch** A laboratory test performed to ensure compatibility between a patient’s blood and a donor’s blood.

**Cryoprecipitate** A fraction derived from plasma, primarily used for its fibrinogen content. Fibrinogen is necessary for control of bleeding.

**Directed Donation** A blood donation given for a specific patient’s use, usually by a patient’s family member or friend.

**Erythropoietin (EPO)** A hormone that stimulates production of red blood cells.

**Hematocrit (he-MA-tow-crit)** The percentage of whole blood that is composed of red blood cells.

**Hemoglobin** The molecule in red blood cells that contains iron, carries oxygen, and gives blood its red color.

**Immunoglobulins** A fraction derived from plasma, containing antibodies used to treat infections and disorders of the immune system.

**Rh** An inherited substance on the surface of red blood cells (like the A and B substances) present in approximately 85% of the U.S. population. Those who have it are designated Rh-positive and those who do not are Rh-negative.

**Transfusion** Replacing blood or blood components that are insufficient in the transfusion recipient’s own circulation.
New York Blood Center (NYBC) is one of the largest non-profit, community-based blood centers in the United States. Serving more than 20 million people in New York City, Long Island, Hudson Valley, Pennsylvania, New Jersey, and beyond, we provide blood-derived products and related services to more than 250 hospitals. Many of these services and products can be of use to Jehovah’s Witnesses.

The services/treatments described in this brochure are compatible with the latest policy change in the June 15, 2000 issue of Watchtower magazine, in which procedures using your own blood and maintaining continuous circulation with your body are allowed, as well as fractions of any of the “primary” components (“primary components” being defined as red cells, white cells, platelets, and plasma). As said in the Watchtower issue, “when it comes to fractions of any of the primary components, each Christian, after careful and prayerful meditation, must conscientiously decide for himself.”

We encourage you to read this brochure carefully to understand your options. You should discuss with your family/friends which treatments you would like to receive, in the event that you are unconscious and the people you trust need to make decisions for you. This is important because such treatment could save your life in the event of life-threatening illness, the need for surgery, or significant bleeding.

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TO SCHEDULE A PERIOPERATIVE BLOOD RECOVERY PROCEDURE, PLEASE CALL:

800.235.5728