

# Let's Talk About...

## Exchange transfusion in a newborn

An exchange transfusion [trans-FY00-zhon] is a procedure to replace most of your baby's blood with blood from a donor.

### Why does my baby need an exchange transfusion?

Your baby may need an exchange transfusion if they have:

- Serious jaundice [JON-diss], or yellow skin
- Rh disease (condition where mother and baby's blood are different and can't mix)
- A serious chemical imbalance
- Been exposed to certain drugs

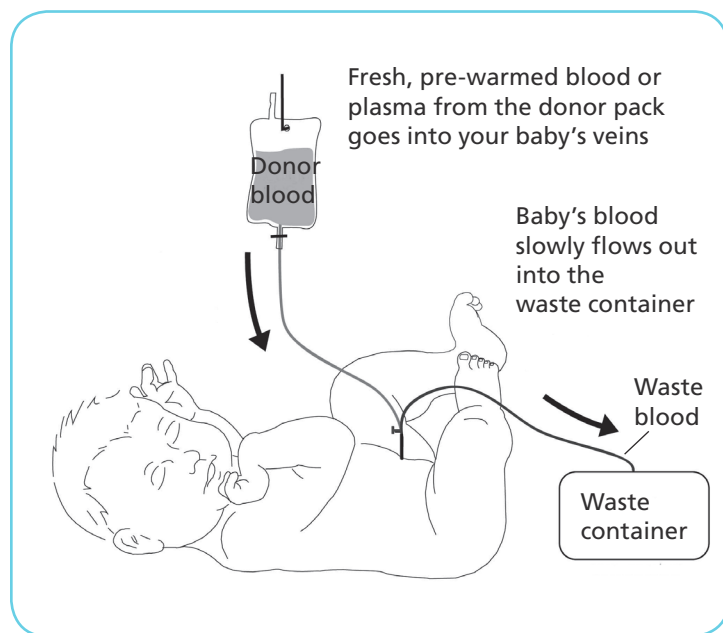
Replacing your baby's blood with fresh, healthy blood can remove toxins (poisons) and restore the blood's proper chemical balance.

### Is an exchange transfusion safe?

To make sure the blood used in an exchange transfusion is safe, the blood bank:

- **Screens all donors before they donate blood.** Donors can't donate blood if they have certain infections and diseases.
- **Tests all blood for hepatitis [hep-uh-TIE-tus], HIV, and other diseases carried in the blood.**
- **Destroys all unsafe blood.**

Donated blood must also be compatible with your child's blood before it is transfused. Blood is divided into 4 types (A, B, AB, and O). Each has a positive or negative Rh type. Your child must only receive blood products compatible with their blood type.



### What happens during an exchange transfusion?

During an exchange transfusion:

- 1 A healthcare provider puts your baby on a flat bed with a warmer over it to keep your baby warm.
- 2 A doctor or nurse inserts a small catheter (tube) into your baby's umbilical vein (vein in the belly button). They may also put another catheter into the umbilical artery.
- 3 The doctor or nurse then connects the catheters to a transfusion set with two lines. One line goes to a bag of donor blood, and the other goes to a waste container.
- 4 Your baby's blood is slowly pulled from their body while fresh, pre-warmed blood goes into your baby's veins. This happens during cycles lasting a few minutes each.

The exchange usually takes 1 to 2 hours. It may need to be done more than once.

## Talking with your child’s doctor about an exchange transfusion

The table below lists the potential benefits, risks, and alternatives for an exchange transfusion. Talk to your child’s doctor about this process, and ask questions before scheduling the procedure.

Possible benefits	Risks and possible complications	Alternatives
<p>An exchange transfusion can:</p> <ul style="list-style-type: none"> <li>• Restore a safer balance in your baby’s blood</li> <li>• Lower the chance of brain damage and other problems</li> <li>• Save your baby’s life</li> </ul>	<p>Risks and possible problems with an exchange transfusion may include:</p> <ul style="list-style-type: none"> <li>• <b>Infection</b>, either from bacteria introduced through the IV, or from an undetected virus in the donor’s blood</li> <li>• <b>Blood vessel problems</b>, such as a blood clot, air embolism (bubble), or spasm in an artery, which may limit blood flow and hurt organs and tissues</li> <li>• <b>Bleeding</b> outside of a blood vessel</li> <li>• <b>Decreased platelet count</b>, with increased risk of bleeding</li> <li>• <b>Chemical imbalances</b> in the blood and tissues</li> <li>• <b>Heart and breathing problems</b></li> <li>• <b>Temperature problems</b> (becoming too hot or too cold)</li> <li>• <b>Necrotizing</b> [NECK-row-TY-zing] <b>enterocolitis</b> [en-TER-oh-coh-LY-tiss], or NEC, a serious bowel disease</li> <li>• <b>Shock</b></li> </ul>	<p>In many cases, there is no alternative to an exchange transfusion, because other possible treatments have been unsuccessful or aren’t likely to be successful.</p>



### Questions for my child’s doctor

---



---



---



---

Intermountain Healthcare complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Se proveen servicios de interpretación gratis. Hable con un empleado para solicitarlo. 我們將根據您的需求提供免費的口譯服務。請找尋工作人員協助