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Who is Carter BloodCare (to the community)?

- ◆ The primary blood supplier to more than 200 medical facilities, for their patients.
- ◆ We service a territory covering 50-plus counties in north, central and east Texas.
- ◆ Our service focus is local. Carter BloodCare is reaching out to local people to voluntarily supply blood to local and regional medical facilities.
- ◆ We are a not-for-profit, 501(c) (3) organization.
- ◆ We contract with medical facilities to provide the services to them that are associated with blood and transfusion medicine. (We collect, process, test, and distribute the blood for their patients; plus, we manage the inventory of the blood, whether it has already been delivered or is waiting to be delivered. This includes monitoring for expiration dates.)
- ◆ In short, we can't do what we do without you – the blood donors!

What are some important statistics about the community blood supply?

- ◆ About 37 percent of the population, at any given time, is eligible to give blood.
- ◆ Less than 4 percent of blood donors, in the Carter BloodCare service area, donates blood.
- ◆ There are more blood donors over age 50 than there are between the ages of 16 and 50. This means the blood-donor base is aging.
- ◆ The aging donor trend means that these loyal donors are facing the stage of life when they will become more likely to require blood products than to be able to donate them.
- ◆ The younger population is not stepping forward to become blood donors at the same rate that previous generations did. It is important to help create an interest in blood donation among our teenagers and young adults.
- ◆ There are about 600 to 800 patients daily who require blood transfusions and many of them will require more than one unit and/or type of blood product.
- ◆ Carter BloodCare likes to see 1,000 donors each day to maintain a safe and sufficient blood supply.

Why is it important to have a community blood bank?

- ◆ We can learn the specific blood needs of the local facilities; the types of procedures they perform and what blood components are associated with those procedures (surgeries, treatments, blood exchanges).
- ◆ We are responsive to emergencies in the areas we serve. Medical facilities can notify us when a large-scale casualty occurs or we might notify them that we

have heard about what is happening and can begin sending blood needs before they are requested.

- ◆ We are really a part of the first response system because blood must be already available before an accident happens. It is the blood on the shelf that helps in those times. The blood we collect after the emergency is just to replace what was required for patient care.
- ◆ Every day people have surgeries. From knee replacement to caesarean baby deliveries; from heart surgery to transplant operations. Each of these could require blood transfusion. Anemia is also a reason that some people might receive transfusions. Additionally, cancer patients receive blood products – called platelets – to help combat the side effects of cancer treatments.
- ◆ Trauma, in the form of accidents and disasters, occurs frequently in the greater Dallas/Fort Worth area and on our rural highways.
- ◆ A sophisticated medical community requires a safe and sufficient blood supply that mirrors the community it serves.
- ◆ Quality is also important. Because we work so closely with our hospital customers, we can work with hospitals to supply a blood product that needs to be collected within a specific number of days before it is transfused to a patient. This means we might need to call a specific donor in our data base who is a match for that patient whose procedure is in the near future.
- ◆ Because we're locally based, we can develop those relationships.

Who can donate blood?

- ◆ Someone can begin at age 16 to give blood with a parent's consent. We have those consent forms on our web site and at our blood drives and in our donor centers.
- ◆ At 17, a person may begin donating independently. And here's the best part ... there is no upper age limit for giving blood. It depends on your personal health.
- ◆ Must weigh a minimum 110 pounds.
- ◆ Must feel well on the day of donation.
- ◆ Every donor must present a photo ID each time he/she comes to give blood. (Government-issued and current, such as: driver license, passport, IDs from your country of origin)

What is the process for giving blood?

You can give blood in four easy steps:

1. Answer a brief, confidential medical questionnaire.
2. Undergo a mini-physical (blood pressure, pulse, temperature and hematocrit check via finger prick)
3. The blood donation process.
4. Snacks and drinks.

We also encourage people to add a fifth step, which would be to make your next appointment.

Why should we give blood?

This is not an original statement. I'm borrowing it from one of our blood donors who said it. And it is beautifully stated.

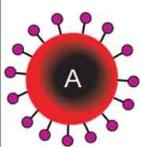
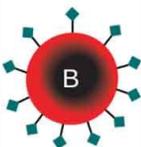
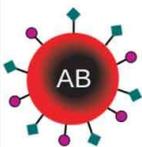
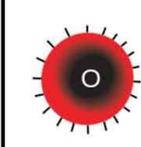
“Giving blood is one of the most extraordinary things that an ordinary person can do for someone else.”

It is a simple act that produces major results – it is life-enhancing, life-prolonging or life-saving. It makes a difference and it requires very little time.

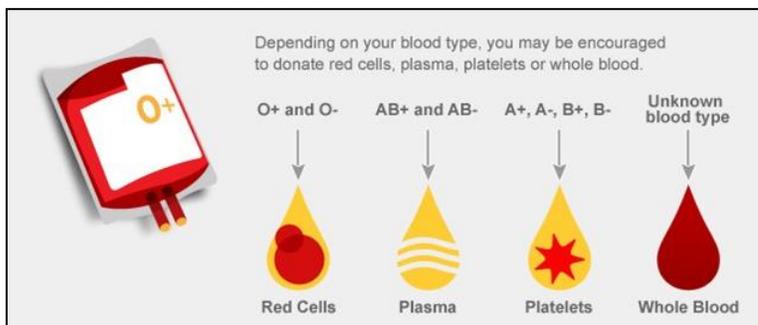
How do you know where to give blood with Carter BloodCare?

- ◆ Visit our website: carterbloodcare.org
- ◆ Keep up with us on social media: Facebook, Twitter, Instagram, LinkedIn, YouTube and others
- ◆ You can find one of our 25 donor centers or blood drives in the zip code area that you prefer, and you can contact us if you want to host a blood drive. Email BookABloodDrive@carterbloodcare.org
- ◆ You can also call or text 800-366-2834 to speak with someone in person about your appointments or preferences for a donation location.

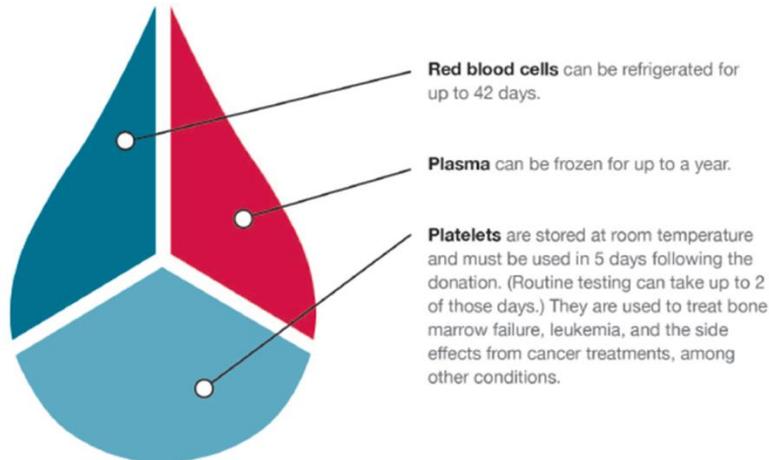
Matching Red Blood Cells by Blood Type Group

	Group A	Group B	Group AB	Group O
Red blood cell type				
Antibodies in Plasma	 Anti-B	 Anti-A	None	 Anti-A and Anti-B
Antigens in Red Blood Cell	 A antigen	 B antigen	 A and B antigens	None

Types of Blood Donations



Does Blood Expire? Yes it does.



How Much Blood is Required by Hospitals for their Patients?

(These are examples and estimates; each patient is different; each scenario is different.)

Organ Transplant	40 units of blood (red cells) 30 units of platelets 25 units of fresh frozen plasma 20 bags of cryoprecipitate
Bone Marrow Transplant	20 units of blood 120 units of platelets
Heart Surgery	6 units of blood
Burn	20 units of platelets
Automobile Accident	50 or more units of blood

Approximate percentage that each blood type is present within the U.S. population:

O Rh positive	38%	B Rh negative	2%
A Rh positive	34%	AB Rh negative	1%
B Rh positive	9%		
O Rh negative	7%		
A Rh negative	6%		
AB Rh positive	3%		