The use of blood and blood products is a routine and necessary part of neonatal intensive care. The smaller and sicker your baby is at birth, the more likely it is that blood and blood products will be used as part of your baby’s management. To make this as safe as possible, blood and blood products are extensively screened before use.

**Blood products**

A blood product such as Normal Serum Albumin Concentrate (NSA) or Fresh Frozen Plasma (FFP) may be urgently needed to stabilise and treat your baby. This is sometimes necessary immediately following birth or if your baby’s condition should become unstable.

**Blood transfusion**

Very preterm babies often need blood transfusions to maintain the levels of essential oxygen-carrying red blood cells. In the early period after birth these transfusions may be urgent, later on transfusions are less common and less urgent.

In most cases a sample of mother’s blood will be needed. This blood will not be given to your baby. It will be used with a sample of your baby’s blood as a ‘double check’ for compatibility before donor blood is given.

The senior specialist doctor on duty makes the decision to administer blood or blood products. Use of these products is considered standard intensive care management and in an emergency, time may not permit discussion of treatment options. In less urgent situations every effort will be made to discuss the administration of blood products with you.

If you have any questions or concerns about this area of treatment please ask the nurse caring for your baby to inform the medical staff.