

## Testimony of Christine Holschlag Daniels, RN

**RE: Raised Bill 6331**

**February 22, 2013**

My name is Christine Holschlag Daniels and I am a registered nurse currently specializing in dialysis. I had worked for the Red Cross for over 7 years before I left in August of 2011.

In February of 2011, I had testified in support of the Red Cross Blood Services requiring a licensed nurse at every blood collection site, as well as, against the Red Cross' proposed language to allow unlicensed personnel to infuse biologics into a person. In the May of 2010 session, I had testified against language to allow 16 yr olds to donate blood.

Since my last testimony, I feel it is important for you to know of the dramatic decline in registered nurses working at blood collection sites in Connecticut. I urge you to ask the Red Cross representatives how many registered nurses are at blood collection sites during donations.

The current bill raised would allow 16 yr old donors to donate under **any voluntary blood program** with written parental consent. Not only are they asking for 16 yr olds to be allowed to donate whole blood, but this would allow them to donate any blood product which also falls under plasma apheresis, platelet apheresis, and double red cell apheresis which includes the infusion of biologics and those processes also may include a potentially severe citrate reaction or allergic reaction.

An article on a study was done on adverse reactions to allogeneic whole blood donation by 16 and 17 yr old teens by the Journal of the American Medical Association in 2008. The study showed that young age had the strongest association with complications. "Infrequent but medically relevant complications, in particular physical injury from syncope-related falls, were significantly more likely in 16- and 17-year old donors." (Eder, et al. 2008). The study also mentions that California allows 15 yr old teens to donate with parental permission, as well as, physician authorization. I feel this is important to mention, not because of the age, but to make you aware of the potential for a serious complication. Physical authorization from a doctor includes review of medical history and a recent physical exam by a medical professional to ensure that the child is healthy enough to lose 1/10 of his blood. Reasons of why a person may not be healthy enough may include neurologic health issues, cardiac complications, and autoimmune diseases. These are just a few indicators and be aware that the health questionnaire donors fill out does not cover all of this or allow for open ended answers.

Many donors take prescribed medications that their questionnaire does not ask about. With exception to a few other medications, the questionnaire specifically inquires about a very short list of medications that has been proven to impact the blood product. With the limited amount of information and lack of a licensed person present to physically assess, this puts donors at higher risk for a complication.

While the Red Cross stands by that they screen donors prior to donation, please ask them who is there to assess? Under the acts, Chapter 378 Nursing and Chapter 370 Physician, it states "Unsafe care in medicine and nursing results in higher death rates, greater incidence of illness, injury or complication, unnecessary suffering and greater long term expense both for the consumer and society". The practice of nursing by a registered nurse is defined as the process of diagnosing human responses to actual or potential health problems, providing supportive and restorative care, health counseling and teaching,

case finding and referral, collaborating in the implementation of the total health care regimen and executing the medical regimen under the direction of the licensed physician, dentist or aprn under CT General Statutes, Section 20-87 (A). If there is no requirement for a licensed nurse nor a physician to be present to assess a potential donor, to properly diagnose a complication when it happens and handle it accordingly, do you really want to allow a higher risk population to donate?

Possible complications include but are not limited to: presyncope, hematomas, loss of consciousness, convulsions/seizures, nerve damage, head injury, lacerations, allergic reactions, and chest pain; of which almost all I have personally witnessed working there. The latest FDA post donation fatality data released was from 2011 with a death toll of 10, in 2010 there were 5.

I strongly urge you to not support the amendment to this bill which would allow 16 yr old children to donate under any voluntary blood program. Do not put these young teens at risk by passing this bill.

Thank you for your attention.

#### References:

Eder, Anne F. et al (2008). Adverse Reactions to Allogeneic Whole Blood Donation by 16- and 17- year-olds. *Journal of American Medical Association*, 299(19), 2279-2286. doi: 10.1001/jama.299.19.2279

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