

2/27/2013

Sarah Emmons, RN, MSN

Testimony in support of Bill 5732

Chairman Gerratana, Chairman Johnson and the Public Health Committee;

My name is Sarah Emmons and I have been a Registered Nurse for 25 years. I worked at The American Red Cross in their Blood Services division for 17 years. I resigned my position last March to return to patient centered care.

I am here today to voice my support for Bill 5732, to ensure a licensed nurse is on each blood drive in the state of CT.

In March of 2010, I testified against Red Cross efforts to enact legislation that would allow non licensed staff to perform apheresis double red cell procedures on blood donors without the presence of a licensed nurse at the blood drive. At that same testimony I also testified against a proposed Red Cross bill that would have allowed 16 year old children to donate blood without parental consent. In February of 2011, I testified again in support of legislation that would require the ARC to keep a licensed nurse at every blood drive. Just last week, I testified before the Childrens Committee, to oppose Bill 6331, that would allow 16 year old donors to donate blood.

I stand before you again, to support another bill in support of safer blood practices. Speaking from 17 years of experience working on blood drives every day, I can testify that keeping one licensed nurse at every blood drive is imperative to keeping our blood donors and blood supply as safe as it can possibly be. It should be all about blood safety.

Since my testimony 2 years ago, there has been a further decline in licensed nurses at Red Cross blood drives in CT. I myself, hated to leave the job I loved, but felt my future with The Red Cross was in jeopardy as a result of my willingness to speak up for safer blood practices.

The need for licensed nurses to shepherd and safeguard the blood donors and blood supply still exists. Potential blood donors need to be screened and assessed for disqualifying health conditions such as heart disease, infection, or communicable diseases. A licensed nurse has the education and professional training to assist in making a safe assessment of each potential donor. Non medically licensed personnel are much more likely to pass donors through the health history process, with medical conditions that could put the donors, as well as blood recipients at risk, due to disease.

The health history questionnaire used by the Red Cross is very simple, and leaves gaps making it easy for most everyone to donate. Since I began working at the ARC, I have seen their health history requirements loosen. For example, Cancer patients used to have to wait 5 years after their last cancer treatment with no recurrence of cancer before they were allowed to donate. If the cancer was melanoma, donors used to be indefinitely deferred. If they had any form of chemotherapy, they were indefinitely deferred. All of these donors can now donate only one year after cancer treatment is completed. Many cancers reoccur, years later.

The Red Cross tests each unit of blood for a limited number of diseases like Hepatitis, Aids, Syphilis and West Nile Virus. The test for Aids still has a small window period where the person could have the disease and not test positive for it. That is why it is crucial to have a licensed nurse present to handle the health history scenarios of donors who may slip through the cracks of ARC questions and testing.

Licensed nurses are necessary to treat adverse physical reactions to the blood donation which can occur. These reactions include, feeling dizzy or lightheaded, fainting, seizures, loss of bowel or bladder control, nausea, vomiting, prolonged recovery, skin pallor, diaphoresis, hyperventilation leading to tetany, lacerations and head injuries related to donors blacking out and falling down, arterial punctures, to name a few. These adverse reactions are not uncommon, especially in the high school setting. Blood Service Nursing Technicians, who make up the majority of staff at blood drives are not trained in First Aid and are given just 12 weeks of training when first hired. Over time, some of these same staff are promoted to supervisory positions over the licensed nurses and can make the final decision on donor eligibility issues.

Since 1993 the ARC has been under a Federal Consent Decree to improve its blood safety practices. Over this time the ARC has been fined millions of dollars for repeated safety violations. The ARC yearly biomedical revenue is in the billions. Considering the repetitive nature of their safety violations it would appear that paying these fines, is easier and more lucrative than correcting the problem.

As you ponder the implications of no more licensed nurses at blood drives, ask yourself: if you or a loved one was in need of a pint of blood, would you feel safer knowing there was a licensed nurse screening out potential problem donors at the blood drive where that blood was collected? If your son or daughter was going off to high school to participate as a blood donor for the first time, would you feel more assured if you knew there was a licensed nurse on the premises to safeguard each step of the blood collection process? Safety is what our job is all about.

It is not easy fighting for safety when your opponent is big business with a name like The American Red Cross. But I plan on fighting this battle as long as it takes because the safety of the blood donors and blood recipients of this state are worth it. Please support Bill 5732 to be sure that every blood drive has a licensed nurse.