

# Preserving plasma

RN reduces the chance that surgery patients will need a blood transfusion.

Jill Staples first meets with surgery patients at Peterborough Regional Health Centre (PRHC) three or four weeks before they find themselves on the operating table. It's her job to get them thinking about something most of us take for granted: the blood coursing through our veins.

As a blood conservation nurse, Staples is responsible for ensuring patients having hip or knee surgery, or a radical prostatectomy – procedures that may lead to the loss of a lot of blood – actually lose as little as possible. For individuals who are anaemic, her role is crucial to recovery.

Staples also teaches patients good blood-boosting habits so they stay healthy after they've been discharged and are recovering at home. She remembers one patient in particular who learned so much about how healthy eating habits can help her anaemia, she not only eats smarter, she also makes sure to get her haemoglobin levels checked twice a year.

As the friendly face they've seen both pre- and post-op, patients at the hospital in Peterborough often turn to Staples with questions about every step of the surgical process. One woman even approached her to find out how chemicals used to perm hair might affect her surgery. Many of Staples' patients are seniors who tell her they probably would have avoided surgery and continued living with painful arthritis in their hips and knees if they hadn't been able to rely on her.

In 2004, Staples became one of 23 blood conservation nurses who are part of the Ontario Nurse Transfusion Coordinators (ONTrac) program. The group, which formed two years earlier with a \$1 million investment from Ontario's Ministry of Health and Long-Term Care (MOHLTC), was created to help develop blood conservation methods, prevent transfusions, and help anaemic patients through their surgeries. Staples says the role also eases the minds of patients. This November marked the 10th anniversary of the Krever Commission report that examined how thousands of Canadians con-



**NAME:** Jill Staples, RN  
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tracted HIV/AIDS and hepatitis C from blood products. While contracting such a disease during a transfusion is extraordinarily slim, Staples says avoiding transfusions is the best way to prevent blood complications such as fever or infection. It also decreases the chance the wrong blood product will be used. The program has also had a tremendous impact on the health system, shortening lengths of stay and decreasing nursing hours needed for tasks like hanging blood at the bedside. Staples says MOHLTC's \$1 million investment has saved \$15 million from bleeding out.

"We're preventing blood transfusions so blood is being used more appropriately," she says. "The spin-off is that the patient is feeling healthier and more energetic, more mobile, and has a better quality of life."

When Staples meets with patients, she teaches them about ways to get ready for surgery. That can mean eating more iron-rich foods to elevate haemoglobin levels,

or taking supplements or medications that can increase red blood cell production.

Although she enjoys her work, Staples admits she's surprised to find herself in the role. Since graduating in 1973, she has worked in special care nurseries in Peterborough, Edmonton and Vancouver. Health concerns forced her to look for a less physically demanding job, and she found herself considering blood conservation. She says she was nervous about making the transition from babies to blood, but an orientation program at Toronto's St. Michael's Hospital, where the blood conservation program originated, was invaluable. So was her personal experience with aging parents. Watching her father struggle with severe rheumatoid arthritis that ended in the amputation of his legs has helped her to empathize with the crippling pain that leads people to decide on hip and knee surgery.

Staples misses working with babies, but she says there are new rewards that come from working with the elderly. It's heartening when she checks in on patients after surgery. They look and feel better than they would without the blood-elevating measures. She says people who have had previous joint surgery, and are returning for a second time, notice a big difference in their health and are much less nervous because they know she'll be around for the ride.

"They look for me now," she says.

Staples is also promoting the role beyond the hospital walls. Last year, she was part of a group of Ontario nurses who travelled to Los Angeles and Calgary to present a guide on how physicians can treat anemia.

She says she hopes this role will continue to grow, not just in Peterborough but in hospitals all across the province. It presents an opportunity to teach patients not just about the best way to get through surgery, but about how to make lifestyle changes that allow for the full enjoyment of those new hips and knees well after the surgery is complete. **RN**

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