



LA-DROP PROGRAM FAQs

How does the LA-DROP program help the community?

The LA-DROP program helps save lives by giving blood transfusions to people who are bleeding a lot, such as after an injury or childbirth. Paramedics can give blood right away at the scene, which helps prevent organ damage and increases the chances of survival.

Is the blood safe?

Yes. The blood used in this program is the same as what hospitals use. It is tested for diseases like HIV and hepatitis and stored under strict rules to keep it safe.

Who can get a blood transfusion before going to the hospital?

People who are bleeding badly from injuries or childbirth and need emergency care from 9-1-1 paramedics.

How does this program support national healthcare goals?

This program helps reduce preventable deaths by giving life-saving blood transfusions before a patient reaches the hospital. It is part of a national effort to improve emergency care. LA-DROP is a collaborator in the Prehospital Blood Transfusion Initiative Coalition (<https://prehospitaltransfusion.org/>).

How will the program's success be measured?

The program will track things like survival rates, how quickly blood is given, any problems that happen, and how much blood is used or wasted.

What kind of blood is used?

The program mainly uses O+ whole blood, which contains red blood cells, plasma, and platelets. This type of blood is best for stopping bleeding and saving lives. It is donated by volunteers and kept cold to keep it fresh.

If whole blood is not available, red blood cells (RBCs) may be used instead.

Why is whole blood important?

- **Red blood cells (RBCs)** carry oxygen to the body.
- **Plasma and platelets** help stop bleeding by making clots.
- **Blood volume** helps keep blood pressure stable.



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How is blood stored and transported?

Blood is kept in special refrigerators inside paramedic vehicles at a safe temperature just as it is in the hospitals.

How are paramedics trained for this?

Paramedics learn how to store and give blood, follow safety rules, recognize bad reactions, and keep proper records.

What happens to unused blood?

Unused blood is sent to hospitals where it can be used before it expires, so it doesn't go to waste.

Are there any risks?

Blood transfusions are very safe, but there are small risks, such as:

- **Mild reactions** (like allergies or fevers) happen in 1-3% of cases and can be treated with medicine.
- **Serious reactions** (like lung injury) are very rare (1 in 100,000 transfusions).
- **Infections** from blood are extremely rare (1 in 1.5-2 million transfusions).
- **Antibody formation** might happen, which could make future transfusions or pregnancies more complicated, but the risk is low.
- **Cold blood** can lower body temperature, so special devices warm it up before it is given.

Can persons of childbearing age get this blood?

Yes. There is a small chance that receiving this blood could affect future pregnancies, but the benefit of saving a life is more important. Using our local numbers, we estimate this would happen in only 1 out of 10,000 transfusions. Hospitals have guidelines to manage this risk.

For more information, visit: <https://allohopefoundation.org/>

Can children receive this blood?

Children under 15 are not included in this program, but in special cases, a hospital doctor might allow it.

What if someone has a religious objection to blood transfusions?

All blood comes from human donors. If someone does not want a blood transfusion for religious reasons, they should tell the first responders or carry a card or bracelet. In emergencies, options may be limited.

Will getting blood before the hospital limit other treatments?

No. Receiving blood early does not stop doctors from giving more blood or medicine later if needed. In fact, early transfusions help the body and may reduce the need for more blood later.



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Is this blood type universal?

O+ blood can be given to most people. However, O- blood would be even safer for all patients, but there isn't enough O- blood available.

More information about whole blood:

- **How much blood is in one unit?** About 500 mL (half a liter).
- **How is whole blood different from red blood cells?** Whole blood has plasma and platelets, which help stop bleeding. Red blood cells alone only help carry oxygen.
- **Why use whole blood instead of separate components?** Whole blood is more natural and reduces the number of donors a patient is exposed to.

Is the blood irradiated?

No, because irradiation slightly damages red blood cells. In emergencies, there isn't enough time to irradiate the blood, and it isn't needed for most patients.

Are the platelets in whole blood effective?

Yes, platelets in cold-stored whole blood work well for up to 14 days and help stop bleeding.

Will this blood change my blood type?

No, but if you get a lot of it, it might temporarily affect lab test results.

Can I still receive other blood products later?

Yes, you can receive more blood products if needed after getting whole blood.

How can I help by donating blood?

Blood donations are needed to save lives. You can donate at local blood banks. **Who can donate blood?**

- You must be at least **16 years old** (with parental consent) or **17 without consent**.
- You must weigh at least **110 lbs (50 kg)**.
- You must be in **good health**.

For more details, visit:

- [San Diego Blood Bank](#)
- [Red Cross](#)