Arterial puncture
Donor name: ................................
Date of birth: ................................
Donor number: ................................
Date: ..................................................
Time of arterial puncture: ................................
Site:  R / L arm (please circle)
Nurse name: ........................................
Signature: ..........................................  
Additional comments:
Thank you for coming to donate blood today. We are sorry that a complication has occurred where the needle was inserted into an artery rather than a vein. This rarely happens and our nurses are trained in dealing with this complication, however it is important that if there are any changes you follow the advice below:

If you are experiencing any of the following symptoms, raise your arm and apply firm pressure:

- Bleeding has restarted.
- Swelling that is large or increasing in size.
- Numbness or pins and needles in the arm, hand or fingers.
- Severe or worsening pain.
- Coldness or paleness of the lower arm, or hand of the affected arm.

Go immediately to the Accident & Emergency department at your nearest hospital, ask someone to take you or dial 999 and take this information with you. A letter for the A&E doctor is included within this leaflet. Continue to raise your arm and apply firm pressure over the site of needle entry on your way to hospital.
YOU MUST NOT USE THIS ARM TO DONATE BLOOD IN THE FUTURE

Bruising
It is likely that a bruise will appear after this has happened. The bruise may look dramatic and some people can find this worrying, especially if it appears away from the donation area. Bruises will disappear with time but this may take several weeks. It is normal for bruises to spread out before fading. If you do experience a bruise the following advice may help during the first 36 hours after the bruise appeared.

Treat your bruise with RICE!

R est – allow time for the bruise to heal. Protect the bruise by avoiding heavy lifting, e.g. at the gym or carrying heavy shopping, and only light, gentle movement is recommended. After 36 hours return to normal activity.

I ce – do not place directly on the skin but under a cloth.

C ompression – pressing on the point where the needle was inserted when a bruise has appeared may reduce the size of the bruise which is forming.

Elevation – if possible, raise your arm above the level of your heart when at rest.
If you require pain relief take paracetamol (according to manufacturer’s instructions) but avoid aspirin and ibuprofen for the first 24 hours.

After 36 hours, contrast bathing may help reduce any swelling. This requires putting a cold cloth on the affected area for 10 minutes followed by a warm cloth for 10 minutes and repeating this several times, ending with a cold cloth.
TO WHOM IT MAY CONCERN

I am sorry to have to refer this donor to you. However, at today’s blood donation session the donor received an arterial puncture rather than the normal venepuncture required for venesection. This was done with a 16 gauge needle.

This is a recognised but rare complication of blood donation and the majority of these settle at the session where we manage to treat them effectively and we do not require to refer them onwards.

However, a small group have continuing problems, because of either lack of haemostasis due to tearing of the artery or bleeding within the tissues, and may develop compartment syndrome, pseudo-aneurysms or just haematoma formation requiring physiotherapy.

We would be very grateful if you could look at this donor and follow up as necessary.

Yours sincerely,

Dr S M Barnes FRCP FCEM
Associate Medical Director – Donors