

The whole blood conservation picture

Blood Conservation for _____

Blood Conservation Nurse: _____ **519-685-8500 ext.** _____

Information About Me

Operation: _____

Operation Date: _____

Number of days before the operation: _____

Age: _____ Height: _____ Weight: _____

Heart Problems: _____

Lung Problems: _____

Hemoglobin (red blood cells; men 135 to 170, women 120 to 160): _____

Ferritin (iron stores; about 35 to 300): _____

Blood Type: _____

Additional Information: _____

Care Plan for Me

Iron

An Iron Healthy Diet

Iron Supplements

IV (Intravenous) Iron

Treatment Date/Time: _____

Location: _____

Eprex

Blood pressure: _____

Eprex Dose	Date/Time	Given By
# 1		
# 2		
# 3		
# 4		

Preoperative Autologous Blood Donation (PAD)

Donation Date/Time: _____

Location: _____