

## Blood Transfusion Team

# Declining a Blood Transfusion

This leaflet has been designed for patients who may wish to decline a blood transfusion. You may be thinking about refusing treatment with blood for religious, cultural or social reasons. This leaflet may help you to make an informed choice on receiving blood.

### How safe are blood transfusions?

In the United Kingdom, all blood donors are unpaid volunteers who are carefully questioned about their health. Before donation every effort is made to identify and exclude those at risk of passing on infections. In addition, every unit of donated blood is individually tested. Any blood that fails these strict tests is discarded.

The incidence of getting an infection from a blood transfusion is very low indeed compared to other risks that we take every day like driving a car. The biggest risk from receiving a blood transfusion is receiving the wrong blood, but even this occurs only very rarely.

It is very important that you are correctly identified at the time your blood sample is taken for testing, and also when you are given a blood transfusion, so that you receive the right unit of blood. You will be asked to state your full name and date of birth. The identification band which you must wear will be checked to ensure all identification details match exactly. Further checks will be made against the unit of blood and essential documentation.

### What are blood / blood products?

There are many reasons why you may need a blood transfusion but usually it is to replace blood lost through trauma, surgery or childbirth.



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Alternatively you may have other disorders leading to anaemia such as bone marrow disease, kidney failure, or cancer and its treatment. A normal blood transfusion replaces lost red cells which contain the haemoglobin for carrying oxygen. Other types of blood products may be given which can contain various substances, e.g. clotting factors that help your blood clot.

Other blood products include:

- white blood cells
- fresh frozen plasma
- platelets
- cryoprecipitate
- albumin
- anti-D
- fibrin sealants

Anti-D is given to rhesus (RhD) negative women who are pregnant. This is done to prevent the development of a condition in their baby called haemolytic disease of the newborn.

There is also an increasing use of special surgical tissue adhesives called fibrin sealants. These help a clot form at the operative site and reduce bleeding.

### **Can anyone refuse a blood transfusion?**

Yes. We want to be sure that we treat every patient in a way which recognises their individual choices and respects their religious beliefs. Before giving anyone a blood transfusion, the risks and benefits of having or not having blood will be discussed with you, to ensure you are aware of any possible consequences. It is up to you to decide if you are willing to accept these risks. If you are pregnant, and you think you would refuse a transfusion, it is very important that you inform your midwife or doctor as soon as possible.

Currently, there is a requirement in the UK to give valid consent to receive a blood transfusion. Whether you choose to refuse or receive blood you will be given patient information material in order to make an informed choice. If you decline to be transfused, you will be asked to complete a form stating which blood products you will accept. You will also be asked

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to complete a consent form for excluding blood and component transfusion. People who refuse blood due to religious reasons are normally encouraged by their assemblies to carry an 'Advance Decision to Refuse Specified Medical Treatment' form. This form details their wishes about any future medical intervention. This form needs to be reviewed and updated regularly.

### **Can I do anything to reduce the need for a transfusion?**

As early as possible before a planned operation, you should make sure you have a blood test so that treatment can be arranged if you are anaemic.

Eating a good balanced diet before your operation may help to boost your iron levels and reduce the chances of you needing a transfusion. Red meat and dark green vegetables are good sources of iron. Iron is important as it helps the body make haemoglobin, the protein that carries oxygen around the body. Alternatively you may consider taking an oral iron supplement such as Ferrous Sulphate. Occasionally, it may be necessary to have iron injections or infusions.

Erythropoietin is a drug that can sometimes be used as a transfusion alternative. This is a hormone produced by the kidneys, which can now be made artificially. It is given by injection and stimulates the body to produce more red blood cells. Most patients are able to receive erythropoietin but there are some exceptions, such as if the blood loss expected during your operation is quite large. Please discuss this with your doctor.

If you are currently on medication to prevent blood clots, e.g. warfarin, aspirin or clopidogrel, or non-steroidal anti-inflammatory drugs, you should check with the doctor to see if this treatment needs to be stopped prior to your operation.

### **Can I donate my own blood before my operation?**

No. The Department of Health does not recommend this technique as evidence shows it is not effective in reducing the need for donor blood. However the Trust does offer a procedure called cell salvage, which is a process during which your blood which is lost during an operation is collected into a special container, then filtered, spun, washed and re-infused back into you. Many patients are able to receive cell salvage but there are some exceptions. Your doctor will be able to give advice as to your suitability for this procedure.

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If you choose not to accept a blood transfusion you will be treated with respect and sensitivity even when the outcome may become grave. The views and wishes of patients with regard to blood transfusions will always be respected.

Your doctor will have a detailed discussion with you about your decision. The risks and benefits of your decision will be discussed. However, where children and young people are concerned, the wellbeing of the child must be paramount and the Trust may seek legal advice.

You can change your mind at any time and choose to receive a blood transfusion. This choice will also be respected and documented in your medical notes.

If you require any further information about blood transfusion please contact the Hospital Transfusion Team by ringing 024 7696 4000 extension 25470/25436 or bleep 1287/2280.

If you are a Jehovah's Witness, it may also be appropriate for you to contact the Jehovah Witness Liaison committee.

The Trust has access to interpreting and translation services. If you need this information in another language or format please contact 024 7696 4000 extension 25470/25469 and we will do our best to meet your needs.

The Trust operates a smoke free policy.

To give feedback on this leaflet please email [feedback@uhcw.nhs.uk](mailto:feedback@uhcw.nhs.uk)

#### Document History

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