Blood transfusion refusal - adults

This leaflet explains more about adult blood transfusion refusal and the St George’s Hospital policy for patients who are admitted to hospital or who are due to have an operation and do not accept blood or blood components. If you have any further questions, please speak to a doctor, nurse or midwife caring for you.

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 or religious beliefs.

What should I do if I know I am coming into hospital?

Before you are admitted to hospital you will usually be invited to attend a pre-operative assessment clinic where you will be seen by a nurse and/or a doctor. You should make the nurse or doctor aware that you request that no blood components or products should be used as part of your treatment. It is very important to tell the hospital staff as soon as possible so they can plan your treatment with this in mind.

The nurse or doctor will then arrange for you to attend a blood refuser meeting (see below) before you are admitted to St George’s.

What if I am pregnant and refuse a blood transfusion?

As part of your first appointment with your midwife you will be asked whether you have any objections to receiving a blood transfusion or blood products. This could include the Anti-D injection.

If you choose to not receive blood, your midwife or GP will refer you to the high risk anaesthetic clinic to discuss your pregnancy and make a plan of care with you. This is called a blood refuser meeting.

What is a blood refuser meeting?

Patients who are due to have an operation or pregnancy care at St George’s and who do not accept blood or blood products as part of their treatment must have a pre-admission meeting with the surgeon, anaesthetist (if required) and a member of the transfusion team. At this meeting we will talk through your wishes about which blood products (if any) are OK to be used.

Your doctor has the right to decide that they are unwilling to perform surgery under these circumstances. In this case you may need to ask for a referral to a surgeon who is known, in principle, to accept patients who do not accept blood or blood products.

If you are one of Jehovah’s Witnesses, the Hospital Liaison Committee (HLC) for Jehovah’s Witnesses may be able to help if you need more information (for contact details, see below).

Informed consent

Please read all the information below on blood components and blood products carefully, as it will help you to make an informed choice about which blood products, if any, you will accept. You can ask any questions you have about this information in your blood refuser meeting, where you will
also be told the risks of treating you without using blood components. You will need to decide if you are willing to accept these risks.

In extreme cases the refusal of blood can lead to harm or even death, although everything will be done to try and avoid this.

Your wishes will be recorded on a treatment plan which you will then be asked to sign. The treatment plan will also be signed by the medical team present in the meeting and then filed in your patient notes.

**Major blood components (also called major fractions)**

**Red blood cells** give blood its colour and account for just under half of the blood volume. They carry oxygen from the lungs to all the cells in the body. We can measure the amount of red cells in the body by testing something called the haemoglobin concentration. A low haemoglobin concentration means that you are anaemic.

Anaemia can be caused by severe blood loss e.g. as a complication during childbirth or as a result of injury or surgery.

Red blood cell transfusion is one of the treatments for anaemia.

**Platelets** help blood to form clots and so stop bleeding. Platelets gather at the site of injury to plug the hole.

A platelet transfusion may be used to treat people who have very low levels of platelet cells in their blood, as if you have low levels of platelets you are at risk of excessive bleeding.

**Plasma (FFP)** is the yellow liquid part of blood. It makes up just over half of the blood volume and is mostly made up of water. Plasma carries red blood cells as well as proteins including ones which help blood to clot (clotting factors).

A transfusion of plasma may be needed to replace lost clotting proteins if there is severe bleeding e.g. after surgery, trauma or childbirth.

**Blood products (also called minor fractions)**

**Cryoprecipitate** is a concentrated blood component taken from FFP when it is defrosted. It contains special proteins which help with clotting.

Cryoprecipitate may be used to replace lost clotting proteins if there is severe bleeding.

**Prothrombin complex concentrate (PCC)** is made from human plasma and contains some of the clotting factors found in FFP. It is often used to reverse the effects of warfarin (a blood thinning drug).

PCC may be used to replace some of the lost clotting proteins if there is severe bleeding after surgery, trauma or childbirth.

**Albumin** is the main protein of human blood plasma. It is not used if you have an emergency bleed but might be given after massive blood loss to regulate the amount of fluid.

**Immunoglobulins** are antibodies which are sometimes given if your immune system is weak.

**Are there any alternatives to blood transfusion?**

In some situations, alternatives to blood transfusion may be appropriate and will be discussed with you during your blood refuser meeting. Please see the alternatives to blood transfusion leaflet for further information.
Where do I need to go?
You will be sent information including the place, date and time of your blood refuser meeting. Please let your medical team know if you are eligible for patient transport.

What do I need to bring with me?
If you are one of Jehovah’s Witnesses, please bring your ‘advance decision to refuse specified medical treatment’ document to the meeting. This is sometimes also called a ‘no blood’ form or an Advance Decision Document.

You may also wish to contact a member of the Hospital Liaison Committee (HLC) for Jehovah’s Witnesses for support before and/or during the meeting (contact information below).

Can I change my mind?
You can change your mind about refusing a blood transfusion at any time. If you do, you must tell staff straight away, so they can change your treatment plan and record your change of decision in your patient notes.

Useful sources of information
Contact details for our local Hospital Liaison Committee (HLC) for Jehovah's Witnesses are:

Patrick Crawford | 07904 301337 | pcrawford@jw-hlc.org.uk
Timothy Eagles | 07711 273116 | teagles@jw-hlc.org.uk
Evan Lewis | 07816 405226 | elewis@jw-hlc.org.uk

Contact us
If you have any questions or concerns about adult blood transfusion refusal, please contact the transfusion practitioner team on 020 8725 4652 (Monday to Friday, 8am to 6pm).

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services
Patient Advice and Liaison Service (PALS)
PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9am and 5pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough Wing (near the lift foyer).
Tel: 020 8725 2453  Email: pals@stgeorges.nhs.uk

NHS Choices
NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.
Web: www.nhs.uk

NHS 111
You can call 111 when you need medical help fast but it’s not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.
Tel: 111