

Adult blood transfusion consent forms are changing

Clinician fact sheet: Blood and/or manufactured blood products transfusion and refusal consent forms



What's new?

- The updated Queensland Health Blood and/or Manufactured Blood Products Transfusion adult consent form SW9002 is now available at www.health.qld.gov.au/consent.
- This consent form requires the clinician to electronically select full consent or limited consent when consenting patients for a blood and/or blood product transfusions prior to printing the document.
- Full consent signifies consent to ALL blood and blood product transfusions.
- Limited consent enables the clinicians to select the appropriate blood and blood product for the consent process.
- If an adult patient refuses all blood and/or manufactured blood products the new "Blood and Manufactured Product REFUSAL to Consent" form SW9480 is required and available at www.health.qld.gov.au/consent.
- Some Queensland Health consent forms work best using Internet Explorer browser.

Full or limited consent – what documentation is to be used?

Currently, Queensland Health procedure specific consent forms include a statement covering the patient's consent for blood transfusions for that procedure, if required. A separate specific transfusion consent form is not required unless the patient has a significant change in health status or where the nature of the intended health care changes.

"Blood and/or Manufactured Blood Products Transfusion" patient information sheets form part of the consent process and are given to the patient (or their substitute decision-maker) when it is reasonably likely the patient will require a transfusion.

A Queensland Health "Blood and/or Manufactured Blood Products Transfusion Consent" form and patient information sheet is required for each blood and manufactured blood products treatment that involves the administration of:

Fresh blood products

- red blood cells (RBC)
- platelets (PLTS)
- fresh frozen plasma (FFP)
- cryoprecipitate (cryo)
- cryo-depleted plasma

Autologous (your own blood) product

- cell salvage
- reinfusion drain

Manufactured (human plasma-derived) also known as fractionated blood products

Written consent is not required for fractionated blood products carrying lower risks than fresh products*, for example:

- human clotting factors
- albumin
- immunoglobulins.

**unless required by local policy*

How long does a consent last?

Queensland Health accepts a signed consent document as valid for 12 months, providing that at the time of receiving any health care:

- the consent form does not indicate a shorter period or other limit (e.g. for a specific treatment only)
- the patient has not withdrawn their consent and does not question their decision
- the patient still has capacity to make a decision
- the patient is able to recall the information previously provided and confirms their consent
- there has been no significant change in health status (including improvement or deterioration) and that care is taken to ensure that changing circumstances do not threaten the validity of the consent that has been given
- there has been no significant change in the nature of intended health care or outcome (for example, a move to palliative care rather than curative treatment).

A new consent should be obtained if:

- a new treatment is proposed which was not previously explained to the patient
- where new alternative treatments become available
- if new risks associated with the treatment are identified.

Some conditions, such as those requiring chemotherapy, or patients with blood dyscrasias, may require multiple transfusions of blood and blood products. The "Blood and/or Manufactured Blood Products Transfusion Consent" form allows for the consent to remain valid for either the current admission (only) or for 12 months if the patient requires recurring blood transfusions. Start and end dates of the transfusions must be documented on the consent form. Where a course of transfusion treatment needs to change due to a patient's condition, or a change in the treatment program, a fresh consent to the new course of treatment needs to be obtained and documented with the obligation to warn again of risks that may arise (see Section 1.11 of the "Guide to Informed Decision-making in Health Care: What is the lifespan of a written consent?").

Refusal – what documentation is to be used?

Adult patients with capacity or their substitute decision-maker can decline a blood or manufactured blood products transfusion. A clinician is obliged to respect a decision to refuse a blood and manufactured blood products transfusion and continue to provide other alternative forms of health care acceptable to the patient.

A Queensland Health “Blood and Manufactured Blood Products Transfusion REFUSAL to Consent” form and patient information is required where an adult patient or their substitute decision-maker refuses a blood and manufactured blood products transfusion.

Refusal expires 12 months after the date recorded on the form, or sooner if specified on the form. A new refusal form is also required if there has been a significant change in the health status of the patient/nature of intended treatment or the associated risks. If any other time or treatment limit is noted on the refusal form (e.g. treatment specific or for a shorter duration) a new refusal form is required. A refusal form covers refusal for all blood and manufactured blood products. Patients can change their mind at any time regarding refusal to consent and a new “Blood and/or Manufactured Blood Products” consent form must be completed.

What information does the patient need?

In addition, to ensure their decision is appropriately informed, the patient/substitute decision-maker will need to understand the details about the range of health care options available, the risks, and the effectiveness of these options in their clinical situation.

This might include:

- the extent the products are derived from or contain blood cellular components, are purified or fractionated from plasma, or are made artificially and not derived directly from blood
- the availability and appropriateness of other technologies such as autologous transfusion by cell salvage and/or reinfusion drain.

As with other decisions about health care, depending on the clinical urgency, patients (or their substitute decision-makers) should be given sufficient time to reflect on the information, consult with those close to the patient or other advisers, and have their questions answered before making a decision.

Complex situations

Where a medical practitioner reasonably considers an adult patient has impaired capacity to make a decision about their health care, and a transfusion of blood and manufactured blood products is required urgently to meet an imminent risk to the life or health of the patient, a transfusion may be administered without consent as long as the medical practitioner does not know of an objection by the patient in an Advance Health Directive. See section 2.2.1 of the “Guide to Informed Decision-making in Health Care: What are Advance Health Directives and when do they apply?” and Section 2.2.2 of the “Guide to Informed Decision-making in Health Care: Consent under an Advance Health Directive” for further information and requirements.

Patients of the Jehovah’s Witness faith may carry a card containing information about their views regarding such health care (it may be titled ‘Advance Health Directive’) or they may have made an Enduring Power of Attorney in which they outline their wishes about receiving blood and manufactured blood products in the event they lack capacity to make decisions about their health care. Where these are valid, they should be followed, and the decisions of an attorney respected. Some Jehovah’s Witness patients may accept acellular blood products, this is an individual decision. For more details refer to Section 2.2 of the “Guide to Informed Decision-making in Health Care: Who can consent for adult patients who have impaired capacity? (Substitute decision-makers)”.

Where additional complexities arise, for example, when a family disputes whether or not blood is to be provided to the patient or where the terms of the Advance Health Directive or Enduring Power of Attorney are unclear, legal advice should be obtained.

Other resources available

Product list: www.blood.gov.au/national-product-price-list.

This fact sheet is a temporary guide to blood and/or manufactured blood transfusions and refusal while the “Guide to Informed Decision-making in Health Care” 2nd edition is being updated (www.health.qld.gov.au/data/assets/pdf_file/0019/143074/ic-guide.pdf).