Patient Information and Consent for Blood Transfusion

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Blood Transfusion

• “The transfer of blood components from one person (the donor) into the bloodstream of another (recipient)”

A Liquid Transplant
Maternity Services

Good at gaining informed consent?

Place of birth

Management of labour

Administration of Anti-D
Definitions

- **Consent** (OED) Permission for something to happen or agreement to do something
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- **Informed Consent** consent to medical procedures/treatment given by a patient after the potential risks, hazards, and benefits of the treatment have been explained
Informed Consent

• Voluntary
• Informed
• Given by a person with capacity
• Received by a practitioner adequately trained in the procedure for which the consent has been given
Patient Blood Management

♥ Evidence-based
♥ Multidisciplinary approach
♥ Optimising the care of patients who might need a blood transfusion.
♥ Puts the patient at the heart of decisions
♥ Ensure that they receive the best treatment
♥ Avoid the inappropriate use of blood and blood components.
Patient Blood Management

♥ Better patient outcomes
♥ Own blood rather than donor blood
♥ Beyond appropriate
♥ Addresses modifiable risk factors
What about consent for Blood Transfusion?
Background

• In March 2010 the Advisory Committee on the Safety of Blood, Tissues and Organs (SaBTO) initiated a public consultation on patient consent for blood transfusion.
Why?

• **Patient Choice:** Many patients may not wish to receive a blood transfusion and/or may wish to know what the alternatives are.
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- **Public Health**: Recipients may not be aware that they have received blood and then go on to donate.

- **General legal and ethical principle**: Valid consent should be obtained from a patient before they are treated.
It had the following Objectives:

• Identify the preferred option for recording consent

• Explore the potential operational impact of implementing a standardised form of consent for transfusion

• Confirm what type of information patients should receive
Identified key issues in transfusion practice

- Not always given information on risks, benefits, and alternatives to transfusion, or the right to refuse transfusion
- Not always made aware that they have had a transfusion
- Those unaware that they have received a transfusion may go on to donate blood when they should not
- There is inconsistent practice across the UK
Consent

• **Valid** consent for blood transfusion should be obtained and documented in the patient’s clinical record by the healthcare professional.

• Patients who have received a transfusion and were unable to give consent prior to it, should be provided with information retrospectively.

• A UK Comparative Audit of consent for transfusion should be carried out, facilitated by the National Comparative Audit for Blood Transfusion.
Consent

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• There should be a standardised source of information for patients who may receive a transfusion in the UK – there is a list of key points that should be included in all adult patient information leaflets.
NCA 2014 Audit of Patient Information and Consent

- Patient Consent Documented: 43%
- Reason for Transfusion Documented: 37%
- Patients didn’t feel involved in decision: 21%
Patient Information Leaflets

• There is a list of key points that should be included in all adult patient information leaflets.
Don’t Forget

• Those patients who were told before an elective procedure that they “may” require a transfusion need to be told afterwards whether or not they received one!
• The majority of blood transfusions go to elective patients where there is time to discuss transfusion and the alternatives available

• It is very important that you find time to give your patient a leaflet and discuss with them the risks and benefits of receiving a blood transfusion
Key issues

• Discuss indications, benefits, risks and alternatives
• How transfusion is administered and importance of positive patient identification
• Provide the patient with written information
• Document the discussion in the patient’s clinical records
• Ensure patient knows that can no longer donate
Consent – what’s new?

• Montgomery Vs Lanarkshire March 2015
• Bolam test no longer applicable for consent
• Law now requires a doctor to take
• “reasonable care to ensure that the patient is aware of material risks involved in any recommended treatment and of any reasonable alternative or variant treatments”
Consent – what does this mean in practice?

♥ Does the patient know about available alternatives?

♥ Have I tried to ensure that the patient understands all of the information?

♥ Have I documented the details of the consent process?
What are the risks of blood transfusion?

• Infection?
  – HIV 1 in 5.9 million
  – Hep B 1 in 2.2 million
  – Hep C 1 in 39 million (NHSBT PHE epidemiology unit)
  – vCJD ???
Figure 3.6:
Cumulative data for SHOT categories 1996 to 2015 n=16677
Local Resources

• Transfusion Practitioner
• Transfusion Laboratory Staff
• Hospital Transfusion Committee
• YOUR Trust Transfusion policy
• The Patient Blood Management Team
• Regional Transfusion Committee

Web based Resources

• www.transfusionguidelines.org
• www3.access-24.co.uk
• http://hospital.blood.co.uk
• www.blood.co.uk
• www.learnbloodtransfusion.org.uk

Patient information can also be found at NHS Choices at: http://www.nhs.uk
and via Facebook, Twitter and You Tube