

3.0 INFORMED CONSENT AND REFUSAL OF CONSENT

Policy	<ul style="list-style-type: none"> • Procedures for the administration blood components and products shall include a mechanism for obtaining informed consent • Elements of informed consent include discussion of: <ul style="list-style-type: none"> » A description of the blood component(s) and /or product(s) which may be transfused » The risks of such transfusion » The expected benefits of such transfusion » Possible alternatives to transfusion and the risks and benefits of such alternatives » The patient must be given the opportunity to ask questions and have concerns addressed » The clinical indication for transfusion shall be recorded in the patient’s medical record • In the case of planned elective transfusion, this discussion should take place well in advance of the planned procedure or course of treatment to allow for the application of possible alternatives • Evidence of acceptance or refusal of informed consent for the transfusion of blood components or products shall be recorded in the patient’s medical record, whether written or electronic
Reason	<ul style="list-style-type: none"> • Informed consent is a process undertaken jointly by a patient (or substitute decision maker where required) and a physician to make a therapeutic decision in a manner that preserves the patient’s primary decision-making role in determining a course of treatment • Obtaining consent for medical treatment in general is a principle of common law (Ontario Consent to Treatment Act, 1996) • Consent specifically for transfusion of blood components and products, while not expressly required by law in Ontario, is a requirement of the standards published by the CSA, CSTM and OLA
Patient population	<ul style="list-style-type: none"> • All patients for whom transfusion is indicated or may be indicated • In circumstances where consent cannot be obtained (e.g. under anaesthesia or trauma)
Responsibilities of Medical Director, Transfusion Medicine	<p>Provide information, promote education for and consult with all health professionals involved in the transfusion process about:</p> <ul style="list-style-type: none"> • The risks and benefits of transfusion of blood components and products • The appropriate use of blood components and products • Alternatives to transfusion
Responsibilities of Treating physician	<ul style="list-style-type: none"> • Obtain consent for or refusal of transfusion and document in the patient’s medical record • Complete the facility specific form for consent or refusal if applicable
Responsibilities of Treating nurse	<ul style="list-style-type: none"> • Confirm that consent has been recorded in the patient’s medical record before requesting product from the Transfusion Medicine Service • Inform or send a record of refusal (if applicable) of transfusion to the Transfusion Medicine Service for entry in its record system
Responsibilities of Transfusion Medicine Staff	<ul style="list-style-type: none"> • Record refusal of consent to transfusion in Transfusion Medicine Service patient information file on receipt of notification of refusal • Check patient history in Transfusion Medicine Service information file on receipt of request for component or product • Notify Medical Director, Transfusion Medicine when blood component or product is requested for a patient for whom a record of refusal of consent is on record



Refusal of consent

- The discussion and refusal of consent shall be recorded in the patient’s medical record
- The Transfusion Medicine Service should have a notation of the refusal of consent in its patient information file, as a secondary check to prevent release of blood component or product that is ordered erroneously

REFERENCES

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