

Transfusion and Alternative Options as Selected by Patient

PATIENT IDENTIFICATION

The intent of this form is to guide the discussion between physician and patient about the patient's selected options for transfusion and alternatives. **Formal documentation of the discussion in the patient's chart is required, including the patient's wishes in a situation where blood transfusion may be life-saving.**

(Patient or Substitute Decision Maker should check each item)

	Accept	Decline
<u>Blood Products (Primary Components)</u>		
Red blood cells	<input type="checkbox"/>	<input type="checkbox"/>
Plasma (Frozen plasma)	<input type="checkbox"/>	<input type="checkbox"/>
Platelets	<input type="checkbox"/>	<input type="checkbox"/>
<u>Fractionated Blood Products</u>		
Albumin	<input type="checkbox"/>	<input type="checkbox"/>
Fibrin sealants	<input type="checkbox"/>	<input type="checkbox"/>
Fibrinogen concentrate	<input type="checkbox"/>	<input type="checkbox"/>
Immune globulins	<input type="checkbox"/>	<input type="checkbox"/>
Plasma-derived purified clotting factors	<input type="checkbox"/>	<input type="checkbox"/>
<u>Drugs</u>		
Epoetin alfa albumin-free (or "erythropoietin")	<input type="checkbox"/>	<input type="checkbox"/>
Recombinant clotting factors	<input type="checkbox"/>	<input type="checkbox"/>
<u>Procedures</u>		
Preoperative autologous blood donation	<input type="checkbox"/>	<input type="checkbox"/>
Acute normovolemic hemodilution	<input type="checkbox"/>	<input type="checkbox"/>
Intraoperative or postoperative Cell Salvage ("Cell Saver")	<input type="checkbox"/>	<input type="checkbox"/>
Cardiopulmonary bypass, Hemodialysis or Plasmapheresis	<input type="checkbox"/>	<input type="checkbox"/>
Specify other treatment: _____	<input type="checkbox"/>	<input type="checkbox"/>

I have received and had the opportunity to read the brochure *Answering questions about alternatives to blood* (see reverse of yellow copy). I acknowledge that all questions have been answered to my satisfaction.

Signature of Patient PRINT NAME DATE (YYYY/MM/DD)

Signature of Substitute Decision Maker PRINT NAME DATE (YYYY/MM/DD)

Relationship to Patient

I have reviewed this form with the patient and have answered all of the patient's questions.

Signature of Physician/Healthcare practitioner PRINT NAME DATE (YYYY/MM/DD)

**This form is valid for 3 months from the date signed. Fax to Blood Bank at 416-480-4185.
Place the original in the patient's chart. Give yellow copy to patient.**



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DISTRIBUTION:

White Original - Chart

Yellow Copy - Patient

Answering Questions about Alternatives to Blood

This page will help explain the types of blood components, blood fractions and alternatives to blood transfusion that may be available to you during your medical treatment. If you have any questions, please discuss them further with your physician.

BLOOD COMPONENTS

Blood components are donated by volunteers and are tested by Canadian Blood Services.

Red Blood Cells

- Red blood cells contain hemoglobin, which carries oxygen throughout the body.
- Transfusion of red blood cells may be necessary when red blood cell levels are very low to prevent damage to vital organs from lack of oxygen.

Platelets

- Platelets are required to prevent or stop bleeding.
- Transfusion of platelets may be necessary in patients with low platelet levels or platelets that are not working properly.

Plasma

- Plasma is the liquid portion of blood and contains substances called clotting factors that help blood clot.
- Transfusion of plasma may be necessary to prevent or stop bleeding in patients with slow blood clotting.

FRACTIONATED BLOOD PRODUCTS (BLOOD FRACTIONS)

Plasma fractions are blood products extracted from plasma collected from many blood donors. The plasma is pooled and then separated into different parts (fractions). This process of separation is called fractionation.

Albumin

- Albumin is a protein from human plasma that may be given to increase the amount of liquid circulating in the blood.

Fibrin sealants

- Fibrin sealants are clotting factors that are used as a medical glue to seal wounds or stop bleeding during surgery.

Fibrinogen concentrate

- Fibrinogen is a clotting factor concentrate used to prevent or stop bleeding in patients with slow blood clotting.

Immune globulins

- Immune globulins contain antibodies and are used to prevent or fight infections in the body.

Plasma-derived purified clotting factors (e.g. prothrombin complex concentrate)

- These are also known as clotting factor concentrates and are used to prevent or stop bleeding.

DRUGS

The medications listed below can be used to minimize or avoid blood transfusion.

Epoetin alfa or “erythropoietin”

- This medication stimulates the body to produce more red blood cells so that the need for transfusion is decreased. Some formulations contain albumin but most do not.
- It should be started 4 weeks prior to surgery and is given once a week by injection (needle) under the skin.

Recombinant clotting factors (e.g. factor 7a, factor 8, factor 9)

- Clotting factors can be made in a lab using recombinant DNA technology and therefore do not contain human blood products. Nonetheless, some products may contain small amounts of blood fractions.
- These drugs are used to prevent or stop bleeding.

PROCEDURES

These medical procedures involve using a patient’s own blood. You should have your physician explain exactly what is involved in any proposed procedure to ensure that it is acceptable to you.

Preoperative autologous blood donation

- The patient’s own blood is collected into a blood bag about 4 weeks before surgery. The blood is stored in the blood bank and can be given back to the patient if needed at the time of the surgery.

Acute normovolemic hemodilution

- Hemodilution involves taking some of the patient’s own blood just before surgery and replacing it with a non blood volume expander (e.g. normal saline or other solution not containing blood). The blood withdrawn is kept at the patient’s bedside. Because the blood remaining in the patient during the surgery is diluted, fewer red blood cells are lost when bleeding occurs. During or at the end of the surgery, the diverted blood is given back to the patient. This can be done in a continuous circuit.

Intraoperative cell salvage (“Cell Saver”)

- Blood is recovered during surgery from a wound or body cavity. It is washed and filtered and then returned to the patient. This can be done in a continuous circuit.

Cardiopulmonary bypass

- Blood is diverted through an artificial heart lung machine where it is oxygenated and returned back to the patient in a continuous circuit.

Hemodialysis

- Hemodialysis replaces the function of the kidney in patients whose kidneys do not work well. It is used to filter blood and clean it before returning it to the patient in a continuous circuit.

Plasmapheresis

- Blood is withdrawn from the patient and filtered to remove plasma. A plasma substitute is added and blood is returned to the patient. In some cases, plasma from another person is used. In other cases, albumin or a volume expander may be used depending on the reason for plasmapheresis. Plasmapheresis is performed in a continuous circuit.

