T-OV1619

(Patient Name)

TO:

Your signature below indicates the following:

- You have received the information sheet, A Patient's Guide to Blood Transfusion (on the reverse side of consent).
- You have received information from your doctor concerning the purpose for a blood transfusion, the likelihood of achieving treatment goals, the risks (transfusion-related infections and adverse reactions), and benefits of blood transfusion, and of any alternative therapies.
- You have had the opportunity to discuss this matter with your doctor, including the option of autologous donation (your own blood, if not contraindicated) and/or directed donation (blood that donor(s) designated for you). You have also been allowed adequate time for predonation, <u>except where there is a life-threatening emergency, there are medical contraindications</u> <u>or you have waived this right.</u>
- You consent to such blood transfusions as your provider has/may order.

ORIGINAL - CHART CANARY - PATIENT

<u>Special Instructions:</u> (Describe here any specific instructions for the patient's blood transfusion, e.g., predonation, direct donation, etc.)

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A PATIENT'S GUIDE TO BLOOD TRANSFUSIONS

(Revised June 2006)

If you need blood, you have several options. These options include receiving blood from the community, using your own blood (autologous), or blood from donors that you have selected (designated donors). Your options may be limited by time and health factors. Although you have the right to refuse a blood transfusion, this decision may hold life-threatening consequences.

It is important to weight the risks, costs and benefits of donating your own blood before surgery. Many elective surgeries do not require blood transfusions. If you have questions about transfusion needs or options, please ask your doctor. Check with your insurance company about your costs for donation. If you choose not to donate your own blood, or if more blood is required than expected, you may receive blood other than your own.

Community Donors. Hospitals maintain a supply of blood from volunteer (unpaid) community donors to meet transfusion needs. Community blood donors are screened by a thorough medical history, and then tested with the most accurate technology available.

Our nation's blood supply is very safe and high quality. Nothing in life is risk-free; however the risks associated with blood transfusions are very small. The chance that a unit (pint) of blood will transmit Human Immunodeficiency Virus (HIV) (the virus that causes Acquired Immunodeficiency Syndrome (AIDS)) or hepatitis C is about 1 in 2 million. The chance that a unit (pin) will transmit hepatitis B is less than 1 in 200,000. ^{1*} Although the risk for other serious infections exist, that risk is much less than the annual risk of dying in a motor vehicle accident in the United Sates (1 in 7,000).²

Using your own blood - Autologous Donation. Using your own blood (autologous) can minimize the need for transfusion with donor blood. Using your own blood will reduce, but not eliminate, the risk of transfusion-related infections and allergic reactions.

Patients who donate their own blood before surgery have a greater chance of needing transfusions during or after their surgeries. Autologous blood donations are not an option for all patients. It may not be safe for you to donate. Ask your doctor if autologous donation is appropriate for you.

Donating BEFORE Surgery. Blood banks can draw your blood and store it for your use. This process usually is performed for a planned surgery. Blood can be stored for only a limited period of time, so coordinating the donations with the date of surgery is important.

Donating DURING Surgery and/or After Surgery. Immediately before surgery, your doctor may be able to remove some of your

blood and replace it with other fluids. After surgery, the blood that was removed may be returned to you.

Designated Donors. Although the blood supply today is very safe, some patients prefer to receive blood from people they know – "designated (or directed) donors." This blood is not safer than blood from volunteer community donors. In some cases it may be less safe because donors known to the patient may not be truthful about their personal history. Blood donated by someone who was recently exposed to HIV or other infections could pass the screening tests, and infect you.

Designated donors must meet the same requirements as community donors. Several days notice is required for the additional processing of designated donors.

If you have additional questions about your options for blood transfusion, please ask your doctor. Information also can be obtained by calling your local community blood bank.

References:

1. Stramer SL, Glynn SA, Kleinman SH at al. "Detection of HIV-1 and HCV infections among antibody-negative blood donors by nucleic acid-amplification testing." New English Journal Medicine vol 351, pp. 760-768, August 2004.

*The risk estimates were adjusted to include first time and repeat blood donors.

2. U.S. Department of Transportation's Fatality Analysis Reporting System website 2003 data:

http://www.hwysafety.org/research/fatality_facts/general.html

Note: This Informational Sheet/brochure is provided as a source of information and is not to be considered a replacement for the *Informed Consent* process prior to the transfusion of blood.

This Information Sheet is adapted from the brochure developed by the California Department of Health Services (Laboratory Field Services, 850 Marina Bay Parkway, Richmond, CA 94804) in partnership with the Medical Technical Advisory Committee of the Blood Centers of California.

Distributed by the Medical Board of California. For information about its contents, please call Laboratory Field Services at (213) 620-6574.

Brochures can be ordered. Maximum copies per order is 300 (includes a master copy for healthcare providers own reproduction). To place your order please Fax your request to (916) 263-2479. This information may be obtained electronically in brochure format:

www.medbd.ca.gov/Pubs_Bloodtransfusion.htm