



CONSENT FOR USE OF ALL BLOOD COMPONENTS AND PRODUCTS



Scan for more information

Family Name: _____
Given Name: _____ Gender: _____
<i>AFFIX PATIENT LABEL HERE</i>
Date of Birth: _____ NHI#: _____

Your doctor, midwife or nurse practitioner considers you may need a blood transfusion. As with any treatment you have the right to accept or refuse the treatment.

You have been given information and an explanation in relation to the administration of fresh blood components or blood products, fractionated from plasma.

This information included:

- The purpose of giving blood components or products
- The type of blood component or product to be used
- The risks associated with blood transfusion
- Possible alternatives to the use of blood components or products
- The risks associated with not having a blood transfusion

I have offered the patient the opportunity to ask questions and where questions have been asked I have answered them appropriately and to the best of my ability.

Name of Clinician

Date

Signature

The New Zealand Blood Service (NZBS) supplies information leaflets to support patients / tūroro to make informed consent; confirming they accept a blood transfusion.
Please use the NZBS leaflets and summary located on the reverse side of this form to assist your discussions.

Patient/Guardian/Power of Attorney to complete this Section

I have been provided with sufficient information about the administration of blood components or products to make an informed decision to accept a transfusion.

I have been given the opportunity to ask questions and my questions have been answered satisfactorily.

I consent to the administration of blood components or products as discussed above.

I also consent to any further alternative measures or treatments as may be found necessary during the use of these products.

I give this consent for myself / for _____ who is my _____

Signature

Date

This consent is valid for:

- the current admission, or
- 3 years for patients returning for continuous treatment

Consent can be withdrawn at any time.

CONSENT FOR USE OF ALL BLOOD COMPONENTS AND PRODUCTS

Why use Blood Components?	Why use Blood Products?
<p>Donated blood is used to replace or top-up your blood supply.</p> <p>Red Cells are used to treat anaemia (a condition where there is a drop in the number of red blood cells able to carry oxygen around the body).</p> <p>Platelets are used to stop bleeding by forming clots.</p> <p>Fresh Frozen Plasma and Cryoprecipitate contain clotting factors that are important to control bleeding.</p> <p>All components are donated by New Zealand blood donors.</p>	<p>Immunoglobulins ('antibodies in a bottle') - are proteins made by the immune system to help fight infection.</p> <p>Albumin is a protein in your body that helps regulate the distribution of fluids and electrolytes in your body.</p> <p>Coagulation factors control bleeding and clotting problems.</p> <p>The majority of blood products are made from plasma collected from New Zealand blood donors. A small number of commercial products come from donors in North America and Europe.</p>
What are some of the risks of blood components?	What are some of the risks of blood products?
<p>Minor/Mild reactions usually involve -</p> <ul style="list-style-type: none"> • Fever • mild allergic rash. <p>These reactions occur in 1-2% of transfusions</p> <p>Major Incompatibility</p> <p>Very rare and occurs in 1 case in every 100,000 transfusions and may cause breathing difficulties, kidney failure and sometimes other life-threatening complications</p> <p>Viral Infection</p> <p>Minor viral infections, that are common in in the community, may be passed from donor to recipient through blood transfusions occasionally.</p> <p>Severe viral infections, such as Hepatitis B, C, HIV/AIDS, Yersinia & HTLV-1 are very unlikely. Hepatitis B risk is estimated as 1 in 300,000 transfusions (1 case every 2-3 years in NZ). Hepatitis C, HIV/AIDS and HTLV-1 risk is estimated in less than 1 in 1,000,000 transfusions. (less than 1 case every 10 years in NZ). Tests and checks on blood donations minimise the potential risk for these infections.</p> <p>Serious Bacterial infections</p> <p>Very rarely with red cells or fresh frozen plasma; approximately one case each year from a platelet transfusion in NZ.</p> <p>Long term blood transfusions</p> <ul style="list-style-type: none"> • Fever and allergic reactions are more common. • Increased risk of developing antibodies • Risk of iron overload from multiple red cell transfusions. 	<p>The overall safety of blood products such as immunoglobulins, albumin and coagulation factors has been proven over the last 50 years. Because they are produced from donated blood, there is a possible risk that they could pass on infection.</p> <p>Mild reaction</p> <p>Allergic reactions occur very rarely. An itch or rash has been occasionally reported.</p> <p>Local tenderness and stiffness can occur at the injection site.</p> <p>Other Considerations</p> <p>Albumin may cause a fall in blood pressure in patients who take ACE inhibitors.</p> <p>Intravenous Immunoglobulins (IVIg) may cause headaches. Patients are advised to be well hydrated prior to infusion. Should a headache occur, a slower infusion rate is usually required.</p> <p>IVIg contains antibodies; administering large doses may cause some red cell damage (haemolysis). Monitoring haemoglobin levels may be needed.</p> <p>Infections</p> <p>The manufacturing process for making blood products is able to inactivate viruses. HIV/AIDS, Hepatitis B, & C, have never been transmitted by blood products from NZ donors.</p> <p>There is no evidence that vCJD has ever been transmitted by blood products from NZ donors.</p> <p>Failure of effect</p> <p>Sometimes the blood product doesn't provide the expected benefit. Your doctor will discuss these issues with you.</p>