



Rancho Los Amigos National Rehabilitation Center ADMINISTRATIVE POLICY AND PROCEDURE

SUBJECT: CONSENT TO BLOOD TRANSFUSION

Policy No.: B504.4
Supersedes: February 7, 2018
Revised: June 14, 2022
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PURPOSE:

To define the procedure of obtaining patient's informed consent to transfusion of blood and/or blood products.

POLICY:

Blood transfusion shall be considered a therapeutic procedure and, therefore requires the patient's physician to obtain informed consent for the procedure except in cases of life threatening emergency and in the absence of any known written advance directive refusing blood transfusion.

Physicians must discuss with the patient or patient's surrogate decision maker the risks and benefits of transfusion, the alternatives to the transfusion, and the possibility of directed donations and autologous transfusions in compliance with the Paul Gann Blood and Safety Act (Health and Safety Code Section 1645). The discussion should be documented either in the patient's medical record or by the consent form signed by the patient.

GUIDELINES:

1. Whenever it seems likely that a patient will need a blood transfusion, the physician shall discuss this matter with the patient or patient's surrogate decision maker beforehand and obtain informed consent. The discussion should include the risks and benefits of transfusion, the alternatives to the transfusion, and the possibility of directed donations and autologous transfusions, where this is feasible and available. The patient shall be provided a copy of the brochure "**A Patient's Guide to Blood Transfusions.**"
2. A patient receiving blood or blood products will verify, by signature, his/her consent to receive these products using the "**Consent to Blood Transfusion**" form or his/her refusal by signing the "**Refusal to Permit Blood Transfusion.**" The signed document must be placed in the patient's medical record if not using electronic consent.
3. In the absence of a signed consent form, for patients who agree to receive blood or blood products, the responsible physician may instead document their informed consent discussion with the patient or their surrogate decision-maker in the patient's medical record.

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COUNTY OF LOS ANGELES DEPARTMENT OF HEALTH SERVICES

APPROVED BY: 

4. Inpatients requiring multiple transfusions may consent to an entire course of therapy.
5. When multiple transfusions are anticipated for patients on an outpatient basis, the consent process is intended to cover the episode of care. Consent should be re-obtained and re-documented with each episode of care or at least on an annual basis.
6. In case of life threatening medical emergency when a patient is unable to give consent, no surrogate is available, and in the opinion of the physician transfusion is necessary, blood and/or blood products may be administered without consent if there is no evidence to indicate that the patient or surrogate would refuse transfusion. The transfusion may proceed with all of the following three elements apply: 1) patient lacks capacity to consent, 2) no legal representative is available, and 3) a delay in the treatment of the medical condition would lead to serious disability or death if not immediately diagnosed and treated. The physician documents information related to the three elements in the patient's medical records.
7. A parent of legal guardian wishing to withhold blood/blood products from his or her minor child shall be advised, as well as the minor child, by a physician of the reason for the transfusion and the risks of withholding blood/blood components. All alternatives to transfusion of blood/blood components will be explored. If there are no alternatives to ensuring a minor child's life and health without blood transfusion and parent or legal guardian refuses the transfusion, contact Risk Management or Hospital Administration for consultation with County Counsel.

References: California Probate Code, Sections 4600 through 4643
Health and Safety Code Section 1645
California Code of Regulations, Title 22, Section 70707
California Hospital Association, Consent Manual 2020

Blood Transfusion Committee--August 18, 2009
CM: August 19, 2014
CM: SR

EFFECTIVE DATE: October 1998

APPROVED BY: