What is informed consent?

Informed consent is a process undertaken jointly by a patient or parent/guardian and a health care provider to make a therapeutic decision that allows the patient or parent/guardian to preserve the primary decision-making role in determining a course of treatment.

Note: Informed consent is a process – not a piece of paper

When is informed consent required?

Consent is required for blood components and plasma derived blood products.

Who should obtain consent?

It is the authorized prescriber’s responsibility to ensure that the patient or parent/guardian gives their informed consent prior to transfusion of a blood product.

When is informed consent not required?

Consent is not required for Recombinant Factor Concentrates because these products do not contain human plasma and are not classified as blood products, refer to Consent for Factor Concentrates – Quick Reference Guide.

Refer to product Fact Sheet to check if consent is required.

Note: Use a competent interpreter when the patient or parent/guardian is not fluent in English.

1. Explain:

<table>
<thead>
<tr>
<th>Reason for the proposed transfusion:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Your blood tests show your ..... cells/count are critically low”</td>
</tr>
<tr>
<td>“We’re concerned about (effects). That’s why I’d like to talk to you about how you feel about a blood transfusion. What do you know about blood transfusions?”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Benefits of the proposed transfusion:</th>
</tr>
</thead>
<tbody>
<tr>
<td>“The blood transfusion will help/improve ...”</td>
</tr>
<tr>
<td>“After the transfusion you/your child will ...”</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Risks of the proposed transfusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Blood transfusion is very safe however there are some risks”</td>
</tr>
<tr>
<td>“Examples of transfusion risks are .....”</td>
</tr>
</tbody>
</table>

For information on the risks of transfusion refer to TR.04.01 Risks of Transfusion, see link on page 2.

<table>
<thead>
<tr>
<th>Risks or consequences that may occur if they do not receive the proposed transfusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Deciding to refuse a blood transfusion is not without risk”</td>
</tr>
<tr>
<td>“The risks of refusing the transfusion are ....”</td>
</tr>
</tbody>
</table>

Any alternative to proposed transfusion that is appropriate and available.

The nature of the proposed transfusion:

- Type of blood product  e.g. red blood cells, platelets or RHIG
- Route e.g. IV infusion, IV injection or IM injection
- What is involved e.g. obtaining a pre-transfusion sample, insertion of an IV, monitoring etc.

2. Provide the patient or parent/guardian with:

Written information about blood transfusion e.g. “Blood Transfusion Answers to Some Common Questions”. Available on line and in multiple languages, see link on page 2.

3. Teach-back

Confirm understanding of transfusion before obtaining consent by asking the patient/parent to repeat in their own words what you have just told them.

“We’ve gone over a lot of information today about transfusions. To help me make sure I explained this clearly, would you tell me in your own words what we talked about?”
4. Encourage the patient or parent/guardian to ask questions:

Ask
“Is the anything else you would like to know?” or
“What concerns do you have?”

5. Document in/on

- Patient medical chart.
- Consent for Transfusion of Blood and/or Blood Products (Form # 94237), or
- Consent for Rhesus Immune Globulin in Pregnancy (Form # 94239), or
- Refusal to consent for Transfusion of Blood and/or Blood Products (Form # 94238)
- File relevant form in the patient medical chart.

6. Emergency situations:

Informed consent need not be obtained
- When urgent treatment is necessary to preserve a patient’s life and continuing health, and
- When it is not reasonably possible to obtain consent, and
- When there is no substitute decision maker

In emergency situations, the lower section of the consent form must be completed by the authorized prescriber and one other physician.

7. Duration of consent

- Consent for transfusion will be applicable for the duration of a hospital stay, or in the case of ongoing treatment, applicable for the course of the treatment.
- For an oncology patient, a course of treatment is defined as the total course of therapy from induction to completion of treatment.
- For patients with prolonged transfusion needs it is recommended that consent be obtained annually.
- For Obstetric patients, consent for Rhesus Immune Globulin in Pregnancy is valid for the duration of the pregnancy and three weeks thereafter.

**LINKS**

Patient information pamphlet:
- Adult version
- Pediatric version

Informed consent for Administration of Blood Products
Risks of Transfusion – Reference Guide
Consent for Factor Concentrates – Reference Guide