PURPOSE OF TRANSFUSION:
During your hospital visit your physician may order, or has ordered, a blood transfusion for you or your child. Blood is an organ that is produced in the bone marrow which carries oxygen to all parts of the body and contains cells, nutrients, clotting factors, and other essential chemicals that keep your body healthy. Reasons for a blood transfusion may include: blood loss from a medical condition, injury or surgery; to replace abnormal blood; to prevent shock; or to assist with clotting. Blood or blood products may also be given to raise the blood counts when the body is not able to produce enough blood cells on its own.

<table>
<thead>
<tr>
<th>Type of Blood Product</th>
<th>Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Red Blood cells</td>
<td>Most commonly used to replace blood loss</td>
</tr>
<tr>
<td>Platelets</td>
<td>Needed for some bleeding abnormalities to assist with clotting</td>
</tr>
<tr>
<td>Fresh Frozen Plasma (thawed)</td>
<td>Needed for some bleeding abnormalities to assist with clotting</td>
</tr>
<tr>
<td>Cryoprecipitate</td>
<td>Needed for some bleeding abnormalities to assist with clotting</td>
</tr>
</tbody>
</table>

RISKS OF TRANSFUSION OF BLOOD PRODUCTS:
Most patients do not experience side effects or complications to blood and/or blood product transfusions. Reactions during or after a transfusion are usually mild and easily treated. Blood is donated by volunteers who are screened to make sure they are at low risk for diseases such as hepatitis or AIDS. Their blood is carefully tested for diseases every time they donate to make sure the blood is as safe as possible to transfuse. Blood is chosen for each patient specifically to prevent complications, but as with any medical treatment or procedure risks/complications/side effects are possible. Some possible reactions to blood include: allergic reaction, fever, or fluid overload (too much fluid in the body). Other more serious reactions can happen but are very rare. These include lung damage (known as Transfusion Related Acute Lung Injury), breakdown of red blood cells which can cause kidney damage, infections from bacteria or viruses such as hepatitis and/or HIV (AIDS) and changes to the immune system. Very rarely, a transfusion reaction may lead to a serious injury or even death.

ALTERNATIVES:
1. No transfusion - If no blood or blood products are given, the problem which blood was supposed to treat may continue.
   Examples include: shock, bleeding, or poor oxygenation to the body. In severe cases, lack of blood transfusion can lead to organ damage and/or death.
2. Vitamins, Iron, or other medicines may be given to help the bone marrow and body produce blood cells and clotting proteins.
3. Factor concentrates (purified clotting proteins) or other medications may help patients improve clotting.
4. Cell Salvage - red blood cells lost during surgery or trauma can sometimes be collected, washed and given to the patient.
5. Autologous - Blood is donated by the patient, for him or herself, prior to admission, in preparation for a planned operation or procedure.
6. Designated donation - Transfusion or blood from volunteer donors (relatives/friends) is an option, but requires preplanning and appropriate amount of time for the blood bank to prepare products. This process may take up to one week to complete, and this blood may actually be less safe than regular donated blood. Directed donation from family members may increase the chances of finding matching blood for patients with extremely rare blood types.

DURING AND AFTER A TRANSFUSION:
During and after a transfusion, it is important that you report any signs or symptoms of a transfusion reaction to your doctor or go to the urgent care or emergency room for evaluation. Transfusion reactions may cause symptoms right away, but may also happen days to weeks after a transfusion. Symptoms to look for and tell your doctor include: fever (temperature higher than 100.4°F), yellowing of the skin, dark or red urine, decreased amount of urine, pain in the back or flank (near the kidneys), trouble breathing, diarrhea, nausea/vomiting, rash or abnormal bleeding.

CONSENT:
By my signature I certify that I have been informed by my physician about the risks, side effects, benefits of blood or blood product transfusion and alternative therapies. I had the opportunity to discuss this matter with my physician, including pre-donation and all my questions have been answered.

☐ I consent to blood product transfusion
☐ I consent to autologous blood transfusion only
☐ I consent to blood transfusion in an emergency only
☐ I consent to specific blood products/derivative only (Must sign the Consent for Non-Blood Medical Management Page Transfusion-Free Medicine at 253-309-9767)
☐ I DO NOT consent to blood transfusion (If refusing blood, patient must sign Consent for Non-Blood Medical Management Page Transfusion-Free Medicine at 253-309-9767)

Date_________________________ Time ______________________ AM or PM ☐ Interpreter / Auxiliary Aid used

Patient/Legally Responsible Person Sign:___________________________________________________________

Relationship to Patient: ________________________________________________________________________

Witness to Signature:_______________________________________________   RN Witness to Phone Consent_____________________________________

PROVIDER STATEMENT: ☐ Consent provided by phone (Provider’s Name) __________________________Date/Time

I confirm that I have explained to the patient/legal representative the nature, purpose, benefits, risks and alternatives to the proposed treatment as well as the risks and consequences of not proceeding with the treatment. I have offered to answer any questions and have fully answered all such questions to their satisfaction.

PROVIDER SIGNATURE________________________________________________ DATE_________________________TIME________________________