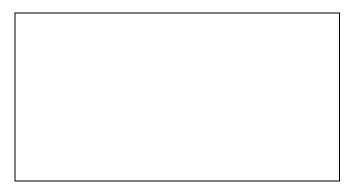


# PMC LIFE CHANGING MEDICINE

Facility: \_

## RELEASE FROM LIABILITY FOR FAILURE TO ADMINISTER BLOOD TRANSFUSION (ADULT)

In connection with my medical condition (low blood count, decreased ability for blood to clot or other blood related disorder) and/or the treatment that I wish to have, Dr. \_\_\_\_\_ has talked with me about the possible consequences of refusing blood and/or blood



products. Bleeding and/or severe anemia could put my life in danger. It could cause permanent brain damage or other great danger to my health. I understand that in such a situation, substitutes for blood or plasma might not work well enough. Blood and/or blood products might offer the only chance to preserve my life.

I refuse to allow any doctor to administer blood and/or blood products to me. I am aware that:

- 1) Bleeding or problems in my blood could cause my death, permanent brain damage, or other injury;
- 2) UPMC does make blood and/or blood products available as a treatment;
- 3) My condition may require blood and/or blood products to prevent or reduce the risk of death, permanent brain damage, or other injury;
- 4) Blood substitutes do not have the same properties as blood and/or blood products. Blood substitutes may not be sufficient to prevent death, permanent brain damage, or other injury;
- 5) I may not be conscious and able to respond when my doctors become aware that it is necessary or advisable for me to receive blood and/or blood products;
- 6) My doctors cannot tell for sure right now if I will need blood and/or blood products during any part of my treatment;
- As with other forms of medical treatment, receiving blood and/or blood products may have certain risks. Not receiving blood and/or blood products could result in much greater risks to my life and well being; and
- 8) Neither UPMC nor its doctors can guarantee my survival, state of health, or the availability of a cure -- whether or not I receive blood and/or blood products.

I fully accept responsibility for my decision. I hereby release the attending physician, Dr. \_\_\_\_\_\_, UPMC, its affiliates and their directors, officers, employees, agents, nurses, and all physicians and health care providers in any way connected with my treatment from all claims or liability including claims resulting from death or disability which may result from their following



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## Facility: \_

my express directions not to administer blood and/or blood products transfusions in connection with my hospitalization.

I understand that a consult service is available at <u>877.674.7111</u> to assist with any questions I or my clinical providers may have regarding blood and/or blood products transfusion

The following are my wishes and directions regarding blood and blood products. Please Circle

### Whole Blood Components

Accept	Refuse	Red blood cells/White blood cells
Accept	Refuse	Platelets
Accept	Refuse	Plasma/FFP

# **Conscience Matters: Fractions**

Accept	Refuse	Albumin
Accept	Refuse	Immune Globulins
Accept	Refuse	Clotting Factors (i.e. fibrinogen, cryoprecipitate)

## Conscience Matters: Medical procedures that use the patient's own blood

Refuse	Apheresis
Refuse	Auto-transfusion (Cell Saver, cell salvage)
Refuse	Dialysis (i.e. renal dialysis, hemodialysis)
Refuse	Epidural Blood Patch
Refuse	Heart and Lung Machine
Refuse	Hemodilution
Refuse	Platelet Gel
	Refuse Refuse Refuse Refuse Refuse

\_, \_\_\_\_

Conscience Matters: Medications given to help the patient's body make more red blood cells

Accept	Refuse	Erythropoietin (with albumin)
Accept	Refuse	Erythropoietin (without albumin)

Intending to be legally bound, hereby I do execute the aforesaid release this \_\_\_\_\_ day of

Signed: \_\_\_\_\_

Patient

\_\_\_\_\_

Signature of Witness

Date

Time





Facility:

#### INTERPRETER'S STATEMENT

Execute if an interpreter is provided to assist the individual in understanding this informed consent form:

I have translated the information and advice presented orally to the individual to be treated by the person obtaining this consent. I have also read him/her the consent form in language and explained its contents to him/her. To the best of my knowledge and belief he/she understood this explanation.

Cyracom ID (if applicable)

Print Name

Signature (Not required if a Cyracom Interpreter Was Used)



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Facility: \_

## **Glossary of Terms: Personal Choice of Blood Products and Procedures**

Whole Blood- Whole blood is made up of four main components: Plasma (FFP), Red Blood Cells, White Blood Cells, and Platelets. Blood carries oxygen and nutrients to the lungs and body tissues.

Albumin - Albumin is a protein made by the liver and flows in the plasma. Albumin is sometimes used to replace liquid when bleeding occurs, as in severe injuries or burns.

**Immune Globulins-** Immune Globulins, also called antibodies, are proteins that flow in the plasma. These proteins are important because they fight viruses and bacteria in the body. Sometimes these antibodies are used in medicines that fight disease, examples of immune globulins are, IgG, IgA, IgM.

Clotting Factors- Clotting factors are proteins that flow in the plasma and help blood to make clots that stop bleeding. Some patients who tend to bleed more easily are given special clotting factors. Examples of Clotting Factors: Cryoprecipitate, Fibrinogen.

Apheresis- Apheresis is a treatment for certain diseases when a patient's antibodies are attacking his or her own immune system. A machine removes the bad plasma and replaces it with a good plasma substitute. Also called: Plasma exchange, plasmapheresis Question to Ask Your Doctor: Can albumin be used as the substitute?

Auto-Transfusion- Blood is drawn from the surgical site into a continuous flow system and is then washed and filtered and returned into the patient. Other names: Cell Saver, Cell Salvage, Salvaged autologous blood

Dialysis- Dialysis uses a machine to act as an organ. Blood flows through the machine in a closed system and filters and cleans it before returning it to the patient.

Other names: renal dialysis, hemodialysis

Epidural Blood Patch- An epidural blood patch stops spinal fluid leakage. A small amount of a patient's own blood is injected into the tissue around the spinal cord. The clotting factors in the blood will help to seal the leak.

Erythropoietin- Erythropoietin is an injected medicine to help a patient's own bone marrow produce more red blood cells. Some brands of erythropoietin contain small amounts of albumin. Other names: recombinant erythropoietin, EPO, hematopoietin, erythropoietin-stimulating agent, ESA.

Heart and Lung Machine- The heart and lung machine keeps the patient's blood moving during certain surgeries. Blood is directed into a machine where it picks up oxygen and is sent back into the patient. The flow of blood is in a closed system and is primed with a non-blood fluid.

Hemodilution- Hemodilution is a process that helps to reduce blood loss during surgery. The patient's blood is collected into a closed system bag and is replaced with a non-blood fluid. After surgery, the patient's own blood is returned to his or her body.

Platelet Gel- Platelet gel is made from a patient's own blood and is used to seal wounds and lessen bleeding. A small amount of blood is collected and spun down to remove the platelets and white cells. This concentrate of platelets and white cells is then put on surgical sites to stop bleeding. Also called: Autologous Platelet Gel or Platelet Rich Plasma.

