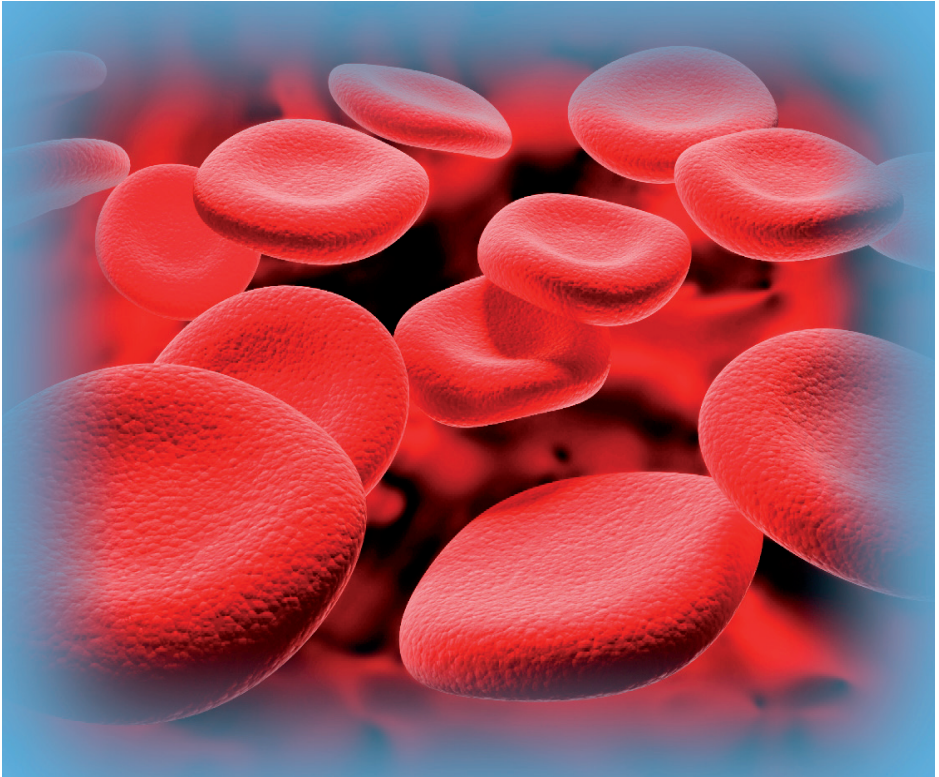


**RUH**

## Patient information: Refusal of blood and blood products



This information sheet tells you about your right to refuse a transfusion of blood or blood products in your pregnancy



## Can anyone refuse a blood transfusion?

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Yes. We want to be sure that we treat every woman in a way which recognises her individual choices and respects her religious beliefs.

Before giving anyone a blood transfusion the risks and benefits of having or not having blood or blood products will be discussed. It is up to you to decide if you are willing to accept these risks. Maternity services have an active programme to reduce blood loss and reduce the number of blood transfusions given for all women.

## What if I am thinking of becoming pregnant?

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You may wish to talk to a doctor before you conceive to think about how you will be looked after in pregnancy and how you can become as fit as possible before getting pregnant. Your General Practitioner (GP) can arrange an appointment for you to see a hospital specialist (obstetrician) to discuss this further.

## What if I am pregnant?

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If you think you are pregnant you should make your GP and midwife aware of your request for no transfusions of blood or blood products to be used as part of your care.

If you choose to not receive blood, we would strongly recommend that you have your baby in a consultant-led unit, such as the Princess Anne Wing at the Royal United Hospital in Bath, rather than at home or in a birthing unit. Your midwife or GP will refer you to a consultant clinic to book you in for pregnancy care.

You should tell the midwife and obstetrician that you do not want to have a blood transfusion or blood products. Please do this in writing and ask for it to be included in your Maternity Record.

If you are a Jehovah's Witness you will probably have an 'Advance Decision to Refuse Specified Medical Treatment' form (sometimes known as a 'no blood form') which tells us of your wishes about treatments. Let your midwife and obstetrician see this and give a copy to them. Your local ministers will be able to provide you with this document.

## Plan of care for your pregnancy

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You will be seen in a consultant antenatal clinic where the following will be covered:

- Iron and folic acid supplementation throughout the pregnancy.
- Regular blood tests to check your haemoglobin (blood count) is above 11g/dl. If your haemoglobin remains low despite taking supplements and you have low iron stores you may be given an infusion of 'liquid iron' into a vein.
- As with all women, you will have a detailed scan which will check the position of the placenta to make sure it is not low-lying.
- Your maternity notes will record that you do not want blood and blood products. You will be asked to sign a consent form (Consent form 5: 'For adult patients refusing the use of blood transfusion or blood components').
- A copy of your 'Care Plan for Women in Labour Refusing a Blood Transfusion' will be filed in your notes.
- You will be asked what treatments and procedures you are willing to accept and these will be written in your Maternity Record.
- We will notify the anaesthetic department that you are pregnant and the expected date your baby is due.
- If you are rhesus negative, we will recommend that you have Anti-D injections during your pregnancy and possibly after delivery (if your baby is rhesus positive). Anti-D is

a protein which is obtained from blood plasma. There is no non-blood derived alternative. If you are a Jehovah's Witness you may wish to discuss this with one of your local ministers or a member of your Hospital Liaison Committee.

- Experienced personnel will be available if you require a caesarean section or if there is heavy bleeding following delivery.

## What happens in labour and following the birth?

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When you come to hospital in labour the consultant obstetrician and anaesthetist on call will be notified. You will be looked after normally in labour but we would recommend that you have drugs to help with the delivery of your placenta (active management of the 3rd stage). If there are any extra risk factors we would suggest that you have a drip into a vein.

If there are complications senior members of the maternity team will be available and your Care Plan will be followed.

At all times, even if an emergency arises, we will respect your wishes. You can be confident that you will receive the best possible care and treatment during your time in the maternity unit.

To help us respect your wishes you should:

- Have informed us in writing and asked that this is kept on your records
- Carry an 'Advance Decision' form and 'Care Plan' with you at all times

Before any operation you will be asked to sign an additional consent form. You will be consenting only to treatment you are willing to accept and which you have discussed with your

obstetrician. If Consent form 5: 'For adult patients refusing the use of blood transfusion or blood components' has not been signed before or is not in the Maternity Record you will be asked to sign this when you come into the delivery ward.

## What if I have other concerns?

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If you have questions that are not answered in this leaflet or are worried about any aspect of your pregnancy and delivery, please talk to one of your midwives or doctors.

For Jehovah's Witnesses, further help is available from

- Your local minister
- Bristol Hospital Liaison Committee for Jehovah's Witnesses  
Local Jehovah's Witnesses Patient Support Group

The details of how to contact these individuals can be provided by your midwife or obstetrician. Alternatively, you can make contact by emailing [info@bristol-hlc.org.uk](mailto:info@bristol-hlc.org.uk).



## Contact telephone numbers

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Monday-Thursday 9am-5pm and Friday 9am-1pm:

- Antenatal clinic 01225 824659
- Antenatal reception 01225 824645