



Blood transfusions and the use of blood products during surgery: information for patients who may wish to decline

This leaflet is for patients who may wish to decline a blood transfusion or blood product (if needed) during surgery or treatment in hospital.

Can anyone refuse a blood transfusion?

Yes. Our aim is to treat every patient in a way that recognises and respects their individual choices, religious, cultural and personal beliefs.

Before giving you a blood transfusion or blood product, the risks and benefits of having or not having them will be discussed fully with you.

It is then up to you to decide if you are willing to accept treatment or not.

The care you receive during your stay in hospital will not be affected by your decision

Why could a blood transfusion or use of blood products be necessary during my surgery?

Severe bleeding can become life threatening in a short time. In most cases, blood transfusion or blood products can save a patient's life. If we know before the surgery is carried out that a patient is likely to refuse blood products, the clinical staff can decide how best to manage any bleeding (in the event that it does occur).

Reasons why some patients refuse blood transfusion / blood products

Many people accept blood transfusion or blood products if the clinical reasons as to why it is necessary are fully explained. However, a few patients will refuse transfusion or use of blood products because of personal or religious beliefs (e.g. Jehovah's Witnesses, Christian Scientists).

Products that may be considered as an alternative

While most people with strict religious or personal beliefs on transfusion will reject whole blood transfusion or any part of whole blood, such as red cells, white cells, plasma and platelets, there are other products that may be considered. These will be discussed with you on an individual basis before your surgery.

The following are fluids that are normally considered to be acceptable and do not have any blood products in them.

- Hartmanns / Plasmalyte
- Normal Saline
- Hypertonic Saline
- Dextrose
- Gelatins (Gelofusine/Haemaccel)
- Voluven / Starches

In addition, the Association of Jehovah's Witnesses published a new policy in June 2004 regarding use of blood products by Jehovah's Witnesses. This stated that individual Jehovah's Witnesses may make a personal decision to accept FRACTIONS – products derived from red cells, white cells, platelets and plasma.

- Cryoprecipitate
- Fibrinogen concentrate
- Albumin
- Intravenous immunoglobulin
- Anti-D immunoglobulin
- Other immunoglobulins e.g. Tetanus
- Prothrombin concentrates e.g. beriplex
- Other clotting factors e.g. Factor VIII

Other precautions that may be taken before, during or after surgery

Please tell the nurse at your pre-op assessment if you have personal or religious objections to the acceptance of blood transfusion / blood products. He/she can then make arrangements for you to discuss the above alternatives with an anaesthetist.

During the anaesthetic appointment, if you are having major surgery, there will be a discussion about the risks of that surgery if you do not have a blood transfusion, so that you are fully aware of these risks.

You may have tests to check for any abnormalities relating to your blood – e.g. anaemia, clotting.

If you are anaemic, the cause of this will be investigated and you will be treated appropriately. If you are taking medication that affects the clotting abilities of your blood, e.g. Aspirin, Nonsteroidal anti-inflammatory drugs (NSAIDs), clopidogrel, antibiotics and even some herbal remedies, this will be discussed and we may advise you to change or stop your medication.

You will be asked to sign a consent form that specifies what you have chosen to accept or not accept as part of any treatment. If you have filled in an Advance Health Directive, you also need to give a copy of this to the clinical team looking after you.

The surgeon(s) carrying out your operation will be aware of your choices and will attempt to keep your surgery short and minimally invasive (depending on the type of procedure being undertaken and your individual health). They may also consider using specialist equipment and anaesthesia that minimise the risk of bleeding.

You may require a stay in the Intensive Care Unit (ICU) following your surgery, particularly if there has been significant blood loss.

If you would like to see the policy relating to blood transfusions / blood products, please ask your doctor or anaesthetist for a copy.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

Reviewed by: Dr Claire Seeley, RBFT Consultant Anaesthetist, March 2026.
Next review due: March 2028.