



WHY IS LEGISLATION PROTECTING THE RIGHT TO CHOOSE DIRECTED DONOR BLOOD IMPORTANT?

Despite the fact that direct donor blood donations have been around for decades, some corporate entities began (in 2023) denying doctors and their patients the right to choose direct donated blood even though the doctor has deemed the order medically necessary and within his / her scope of practice for their patient. When a corporate entity denies an individual the right to choose direct donation, it is arguably a **direct violation of the 14th Amendment of the Constitution (Section 1) and The Patient Self-Determination Act of 1990.**

DEFINITIONS:

- **Directed donor blood** means that a blood donor is a known donor for the recipient (generally, but not always, a friend or relative).
- **Autologous donation** means donating one's own blood in advance of an upcoming surgery or procedure where loss of blood is likely.

STATS:

- Approximately **1 in 70** people need a blood transfusion each year.
- An estimated **3% of people donate blood.**

FACTS:

- Both autologous and directed donor blood are **legal, safe, and have a decade's long history of prior use.**
- The blood industry is a lucrative **multibillion dollar industry**; the **United States supplies more than 70% of the world's blood products.** They also profitably sell blood to the pharmaceutical industry (there are many products made from human blood components) and to research organizations.
- **Directed donor blood** has been a **common practice for decades.** During the 1980's and 1990's, it was a **standard of practice** in major surgeries to ask patients if they wanted to use directed donor blood.
- **All blood is not equal** in terms of quality. For example, the blood of a healthy 20 year old athlete who eats in a healthy manner would be superior to a 50 year old blood donor who eats a standard American diet and is on 4 medications.
- **As per American Red Cross guidelines, a limited number (12) of pathogens are screened for.** There are **far more than 12 pathogens** that can be transmitted by blood. Some of these that are NOT routinely screened for include: Epstein-Barr Virus, Herpes Viruses, SARS Cov-2, E. coli, Staph aureus, and parasites for example. This is an additional advantage to knowing your donor.
- **Directed donor blood is generally very fresh**, whereas stored for general population blood can be up to 50 days old. **As blood ages** in a bag, there is an **increasing risk of death, blood clots, multi-organ dysfunction, increased hospital stay time, decreased oxygen carrying capability and more** when aged blood is transfused.



MYTHS & REALITY:

Myth: Everyone might want directed donor blood

Reality: **ALL** blood transfusions (directed and anonymous) **require a doctor's written order**, and this should be a decision made jointly by the patient and their doctor, not a corporate entity.

Myth: Direct donor blood increases risk of liability

Reality: There is **NO increase in liability** by using directed donor blood. Any patient who receives a transfusion has to **sign an "inherent risk waiver"** that is a completely separate form from any other hospital form. This form states that receiving a transfusion has inherent risks associated with it, and releases liability (provided that the blood is handled according to FDA guidelines).

Myth: There will be increased liability for doctors if there is codification to the right to choose direct donor blood.

Reality: Tennessee has already **enacted a bill** in their state **without disrupting** the medical process or causing any legal issues within their medical community. It's business as usual.

Myth: Direct donor blood is harder to track and trace

Reality: Direct donor blood, like **ALL blood is barcoded**, thus making it just as **easy to track and trace** as anonymous donor blood.

Myth: Direct donations take away from blood that could be used for someone else

Reality: **Direct donors ADD to the pool** of blood availability. They are typically not regular blood donors and are donating because they have an emotional or community connection with the person they are donating to. They are typically **ADDING** to the already precious blood supply, freeing up the anonymous blood supply for someone else!

Myth: Direct donor blood isn't as safe as anonymous donor blood

Reality: **Direct donor blood and anonymous donor blood are both tested for exactly the same things.** There is no difference in safety. In fact, statistically, plasma centers (in which people are paid to donate) are often located in lower socioeconomic areas which can be more likely to lower the quality of blood in a variety of ways.

Resources:

<https://www.ncbi.nlm.nih.gov/books/NBK138223/>

<https://law.justia.com/codes/tennessee/title-68/health/chapter-32/section-68-32-103/>

Book: Blood Money, The story of Life, Death, and Profit inside America's Blood Industry by

Kathleen McLaughlin

Book: Blood by Douglas Starr



X @blessedBHB

TRUTH. @BBHB

in @blessedBHB

blessedbyhisblood.com | info@blessedbyhisblood.com | P.O. Box 21 Anna, Texas 75409