Discussion Board 3

[Name of the Writer]

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A five-year-old child suffered an acute trauma from a bike accident and required an immediate blood transfusion (Conti et al. 2018). As the recipient family's recognized as Jehovah's witnesses, they strongly condemn the actions of a blood transfusion, no matter how mandatory it is. Their religious doctrine condemns the act of a blood transfusion, even in emergencies. The use of red blood cells, white blood cells, platelets, and blood plasma to save a patient is not allowed by the Christian doctrine. Procedures which are however permitted are transfusions of autologous blood parts, intraoperative blood salvage, the heart-lung machine, dialysis, plasmapheresis, labeling or tagging, etc. How the nurse should discuss this situation with the parents and interdisciplinary health care team is by providing them with an alternative solution which does not disrespect or disobey their faith. However, the best course of action for the child who requires immediate transfusion is to refer to the American Code of Medical Ethics to his parents.

Use the American court's measures that prevent paternities from implementing such maternal accountability, not in the child's finest concern and then carry on with the blood transfusion. The primary ethical issues concerning the denial of plasma transfusions in a adolescent are theatrical (Malkin et al. 2016). The autonomy performed through informed consent is the fundamental value in bioethics. However, this urgent intervention is for the best therapeutic interest of the patient. Moreover, the principles of moral ethics also define an immediate, intuitive, and imperative action which is needed for the wellbeing of the patient. A more compatible method for such faith holders can be identified in this case as Neocyte transfusions, or cryopreserved red cells. These methods if appropriately used and professionally can help save patients life and also not be of such a primary concern for the patient’s family with Jehovah’s faith.

**References**

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