

# Christian Congregation of Jehovah's Witnesses



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January 3, 2006

TO ALL CONGREGATIONS

Re: Hospital Liaison Committees

Dear Brothers:

Jehovah has richly blessed the efforts of his people to help the medical and legal communities understand the religious position that we take on blood transfusions. As a result, it is now much easier to receive respectful, competent medical treatment. This has greatly relieved the anxieties that often accompany our endeavors to maintain Christian integrity and ‘abstain from blood.’ (Acts 15:28, 29) The work of the elders serving on the Hospital Liaison Committees (HLCs) has played a vital role in this effort. These elders have made presentations regarding our position to tens of thousands of doctors, leaving them numerous items of printed information on nonblood alternatives, including videocassettes and the DVD entitled *Transfusion Alternatives—Documentary Series*.

Hospital Information Services (HIS) and HLC representatives have attended large medical conferences in many parts of the world where doctors have appreciatively accepted material helpful in treating their patients without using blood transfusions. Now, hospitals and doctors regularly contact HIS and the HLCs, seeking assistance in providing medical articles that will assist doctors to develop appropriate treatment options for Jehovah's Witnesses.

Presently there are 53 elders serving on the 10 HLCs under the direction of the Ghana branch office. Worldwide, there are over 9,000 elders serving on more than 1,535 committees. This arrangement, developed by the Governing Body 18 years ago, continues to be a valuable resource for Jehovah's Witnesses. How can you benefit from this arrangement?

Annually, all elders receive an updated listing of their local HLC with appropriate instructions. The elders in your congregation keep this material readily available and are pleased to put you in touch with the local HLC when you require their help. Members of your local HLC have developed a close working relationship with physicians in your area who are experienced in using practical and medically safe alternatives to blood transfusion. It is wise to seek HLC assistance, especially in the following situations.

**Pregnant sisters:** Complications can arise throughout pregnancy. Identifying an experienced, cooperative doctor and medical facility in handling situations involving hemorrhage or other blood-related situations can save valuable time, often safeguarding the health and life of the sister and her child.

**Children:** When a life-threatening emergency occurs, the legal reality is that physicians can treat minors with what they consider standard practice—which may include blood—without parental consent. Therefore, the degree of cooperation and the experience of the attending physician is crucial. Parents need to consider their best option, which, with the help of the HLC, may mean locating an experienced physician in another city. In many countries, there is a legal provision in which the court can determine a capable teen to be a “mature mi-

nor,” hence competent to make medical decisions. In these cases, the HLC together with HIS at the branch office may be in a position to assist.

**Serious surgery or trauma:** Situations where blood transfusions are commonly administered can present serious challenges for a Christian. By contacting the HLC, you can be put in contact with an increasing number of doctors who are able to provide nonblood treatment options with excellent outcomes. In the case of surgery, contacting the HLC is advisable before selecting the surgeon.

Medical care can be very expensive. A good health insurance policy may be helpful. Doctors and hospitals rightly expect compensation for services rendered, and pharmaceuticals are often expensive. Appropriate planning may help avoid serious financial problems.

Wisely carry your durable power of attorney (DPA) card and have a copy included in your medical records. Talk to your doctor, the surgeon, and the anesthesiologist assigned to your case well before the scheduled operation. Any necessary surgery involves a team, all members of which need to understand your health-care instructions.

When necessary, to ensure that their wishes are honored, some publishers wisely appoint non-family members who are Jehovah’s Witnesses as their health-care agents. When you choose to do this, it would be prudent and a kindness to advise your non-Witness family of your decision. Thus, if you are hospitalized and unconscious, your family members will not be surprised when a non-family member speaks for you regarding health-care matters. In some recent situations when Witness patients neglected to have such a dialogue with non-Witness family members prior to their hospital stay, court intervention was sought to overturn a duly executed DPA card.

When you advise the elders in your congregation that you will be admitted to a hospital, they are in a position to render assistance. Furthermore, elders serving on the Patient Visitation Group (PVG) visit many hospitals to ensure that all Witness patients receive support and spiritual assistance. This arrangement, however, does not replace the care that your local congregation elders will provide if they know you are in the hospital. Due to patient-privacy regulations, hospitals are legally required to control access to patient information. During your admission, you may specifically state and have them note that you welcome a visit from a minister of Jehovah’s Witnesses.

As needed, have someone accompany you who can assist in filling out the necessary documents stating your desire to be treated without blood. If you encounter difficulty, seek the assistance of the elders. Hospital forms should be read very carefully. Before signing, be sure they are in harmony with your health-care directives. You have the right to modify the documents as necessary, initialing each adjustment you make.

Reviewing these helpful suggestions should serve to lessen your anxiety should a serious medical situation arise, perhaps unexpectedly. It also demonstrates your sincere desire to please Jehovah in all matters. In this connection, please note the answers to the following frequently asked questions.

**1. How do I contact the HLC?** Every year all elders receive an updated list of the HLC caring for your area with appropriate contact information. They have been requested to

keep this list available at all times and will be happy to put you in contact with the HLC without delay. This listing and accompanying instructions enable your elders to provide assistance in harmony with your needs.

**2. If at present I do not have a primary care doctor, how do I locate one?** Check with fellow Witnesses in your local area. Directories are also published, both on the Internet and in print, that list doctors according to specialty and often provide descriptions of services available. HLCs specialize in locating doctors to provide treatment where blood transfusion becomes an issue.

**3. May the HLC speak directly with my doctor?** Depending upon the circumstances, this may be needed. The HLC can be a valuable resource to both the patient and the doctor. HLC brothers will often be at the hospital when an emergency develops, and *with your permission* they may discuss your case with the doctor. In some very serious cases, the HLC has been helpful in offering appropriate suggestions when surgery is being planned. Often there is a close working relationship between doctors and members of the HLC. They are also in a position to arrange a consultation with other cooperative doctors who are willing to share their experience. The HLC is in a position to explain our religious position on blood, but they cannot make health-care decisions for you.

**4. If I already have a doctor that I am comfortable with and feel confident in his ability to treat according to my wishes, is it necessary to contact the HLC before treatment?** No. However, it is good to remember that even though a doctor says he is willing to treat you without using blood transfusions, what you really want is a doctor who is experienced in using the many nonblood medical alternatives and strategies, if problems develop. A doctor who simply agrees to treat you without using blood is only complying with the legal principle of patient autonomy.

**5. When difficult surgical procedures are planned, how can the HLC be of assistance?** They maintain contact with doctors who have become experienced with treating Jehovah's Witnesses without blood transfusions. They are able to facilitate contact with doctors in other nearby cities who specialize in a particular procedure. Additionally, they have the resources of HIS to draw upon when necessary.

**6. Why is it important to speak to your anesthesiologist (in addition to your doctor) about surgical treatment options?** Although you may know and have met with the surgeon, anesthesiologists generally rotate, and it becomes difficult to determine which one will be assisting during the operation. Surgery is a team effort, and all members of the team need to understand your position on blood, on any pharmaceuticals containing minor blood fractions, and on medical procedures involving the use of your own blood. It is unfair to the medical team when you fail to communicate your wishes well in advance of the surgery. Special arrangements may be necessary where blood loss may be an issue.—*km* 1/91 p. 4 pars. 15-16.

**7. If difficulties in connection with a pregnancy are expected, why is it wise to contact the HLC?** HLCs carefully search for obstetrical/gynecological doctors who have experience in managing difficult cases, such as high-risk pregnancies that can result in serious complications for both mother and child. Special treatment protocols and strategies have been formulated and provided to the HLC for the doctor's use. Knowing of and using these strate-

gies have improved outcomes. Early selection of a highly qualified doctor is vital. Significant progress has been made in caring for mothers as well as newborns, especially premature infants. Nevertheless, much depends on the experience of the doctor and hospital.

**8. Can any doctor or hospital give complete assurance that blood or blood fractions will not be used in treatment of a minor?** The legal reality is that the law requires blood transfusions to be given, if in the medical judgment of the physician, no other modality or medical procedure exists to conserve the life of the child. This can be accomplished by using “emergency privilege” or a court order. However, there are a growing number of hospitals and doctors known to the HLC who will attempt to care for minors without resorting to blood. Treating the pediatric population without blood presents many challenges for the medical profession, but this field has seen significant progress in alternatives to blood transfusion in recent years. While Witness parents do not consent to blood transfusions for their children, they do seek the best medical attention available, seeking the cooperation of the doctors they select. With the assistance of the HLC and the HIS at the branch office, court orders can often be avoided.—*km 10/92 p. 3 par. 5.*

**9. Under what circumstances may a teenager be declared a “mature minor”?** When circumstances justify it, in many countries a court may determine that the religious convictions, moral values, and mental competence allow a teenager to be viewed as an adult, a “mature minor,” hence able to make decisions about his medical treatment. Wisely, Christian youths seek such spiritual stature early in life.—*w91 6/15 pp. 16-17 pars. 15-18; w02 4/1 p. 27.*

**10. Could my financial circumstances or health insurance plan restrict treatment options?** In many countries, the cost of medical treatment and pharmaceuticals has increased greatly in the past few years. Although improved treatment options are now available, they are often at significant cost. In some cases, this has placed certain transfusion alternatives out of reach, unless there is adequate insurance or financial backing. National or district-funded programs may be offered but with restrictions on where procedures may be performed due to cost constraints. When choosing a health insurance program, review and select it carefully. For example: Will your policy allow you to go “out of the network,” when necessary, in order to receive the services of physicians who are experienced in nonblood medical management?

Each family should plan ahead to the extent possible as to how they are going to care for their health-care needs. While it is not possible to cover every eventuality, good planning is essential. Since costs are only going to increase and suppliers of medical care expect to be paid promptly, it is reasonable to expect that each family will have reasonable plans in place to care for chronic ailments, as well as emergency situations.

**11. What is the relationship between the HLC, PVG, and HIS?** HIS coordinates the activities of the HLCs, while HLCs, in turn, coordinate the activities of the PVGs. Appropriate materials are supplied for HLC use for meeting with doctors. HLCs have 24-hour access to consult with HIS when suggestions are needed in caring for a particular case. From time to time, seminars are held, providing training on various aspects of their work. Careful selection of these elders for this special assignment provides a ready source of help in a time of need.

**12. What are “out of the network” provisions?** Many health-care plans have contracted with certain doctors and hospitals that have agreed to work with them at predetermined fees. Depending on the plan purchased, a patient may have the option of seeing a doctor outside their plan, when necessary. However this may involve a co-payment.

**13. What is the responsibility of the PVGs, and will I always receive a visit when I am hospitalized?** Patient Visitation Groups have been organized in many cities where there is the likelihood of Witness patients being in the hospital without elder support. When the PVG finds a patient that needs assistance and support from a local congregation, they facilitate contact with the elders in the patient’s congregation. PVG activities do not replace the local congregation’s responsibility to visit and care for the needs of those in the hospital. (It is important to identify yourself as a Witness upon admittance, letting the records show that you would like to receive a visit from Witness elders. This allows visitation access by the PVG, as well as by your local elders.)

**14. May the HLC be called on behalf of non-Witness relatives?** The Governing Body has arranged for HLCs to serve the interests of Jehovah’s Witnesses and their minor children in all congregations worldwide. This includes those approved to be unbaptized publishers. It is not possible to extend their activities beyond this. Care needs to be exercised on our part that we do not impose our conscience upon others.

**15. When traveling and an emergency develops, how can I contact the HLC?** Each elder has contact information for the HLC locally, and the HLC, in turn, has contact information for the entire country. Hence, a call to one of your local elders will provide the needed information anywhere in the country. In the case of foreign travel, a call to the branch office will provide the contact information required. Please remember that while DPA cards are valid in any region in Ghana, they may not be legally enforceable in some other countries. Nevertheless, they do state your wishes for medical treatment and should accompany you.

**16. Are Bloodless Medicine and Surgery Programs (BMSPs) sponsored by the HLC or the branch office?** No. Some hospitals have requested the assistance of the HLC to determine how best to treat Jehovah’s Witnesses. Many excellent services have been provided as a result of hospitals organizing their staff to care for a growing population of patients requesting treatment without blood transfusions. The HLC activity is completely separate from the operation of any hospital program. The branch office, HIS, or the HLCs do not endorse health-care providers or any business organization.

Jehovah continues to show his loving concern for our welfare through his organization, and we continue to seek his blessing as we uphold his perfect law regarding blood. (Ps. 19:7) We send an expression of Christian love and greetings.

Your brothers,

*Christian Congregation  
of Jehovah’s Witnesses*

PS to the body of elders:

This letter should be read to the congregation by one of the elders in a clear, articulate manner during the Service Meeting part scheduled for the week beginning January 30, 2006.

TO ALL CONGREGATIONS

January 3, 2006

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All elders should be provided with a copy of this material. This letter replaces the June 1, 1995, letters to the congregation and to the body of elders, which should be removed from the congregation's permanent file of policy letters and destroyed. After the aforementioned Service Meeting part, this letter should be retained in the congregation file.

As mentioned in the letter, each year the body of elders receives an updated HLC listing and an accompanying letter providing additional instructions for contacting the HLC. As these items are received, the material from the previous year should be discarded and the new material retained in the congregation file.

Thank you for your diligence in following these instructions and in assisting our brothers as they endeavor to abstain from blood.