

Blood Donor Educational Material

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YOU MUST READ THIS BEFORE YOU DONATE!

- Your **accurate and honest** responses are critical to the safety of patients who receive blood transfusions.
- Each question is necessary to fully evaluate the safety of your donation.
- As required by regulations, we are instructing you not to donate blood if you have a risk factor.
- If you don't understand a question, ask the blood center staff for assistance.
- YOUR RESPONSES ARE CONFIDENTIAL.

To determine if you are eligible to donate, we will:

- Ask about your health and medications you are taking or have taken.
- Ask if you have traveled to or lived in other countries.
- Ask about your risk for infections that can be transmitted by blood – especially HIV (which is the virus that causes AIDS), and viral hepatitis.
- Take your blood pressure, temperature, and pulse.
- Take a blood sample to be sure your blood count is acceptable before you donate.

If you are eligible to donate, we will:

- Clean your arm with an antiseptic (Tell us if you have any skin allergies).
- Use a sterile needle and tubing set to collect your blood.

We NEVER reuse a needle or tubing set.

WHAT HAPPENS AFTER YOUR DONATION

To protect patients, your blood is tested for hepatitis B and C, HIV, syphilis, and other infections. If your blood tests positive, it will not be given to a patient. You will be notified about any positive test result which may affect when you are eligible to donate in the future. There are times when your blood is not tested. If this occurs, you may not receive any notification. The blood center will not release your test results without your written permission unless required by law (e.g., to the Health Department). I understand and agree that my blood and stored blood samples may be used for transfusion, further manufacturing, testing, training, research, and other uses as needed.

DONOR ELIGIBILITY – SPECIFIC INFORMATION

Certain infectious diseases, such as HIV and hepatitis, can be spread through:

- Sexual contact
- Other activities that increase risk
- Blood transfusion

We will ask specific questions about sexual contact and other activities that may increase risk for these infections.

What do we mean by “sexual contact?”

The words “have sexual contact with” and “sex” are used in some of the questions we will ask you. These questions apply to all of the activities below, whether or not medications, condoms or other protection were used to prevent infection or pregnancy:

- Vaginal sex (contact between penis and vagina)
- Oral sex (mouth or tongue on someone's vagina, penis, or anus)
- Anal sex (contact between penis and anus)

A “new sexual partner” includes the following examples:

- Having sex with someone for the first time
OR
- Having had sex with someone in a relationship that ended in the past and having sex again with that person in the last 3 months.

HIV/Hepatitis risk factors

HIV and hepatitis are spread mainly by sexual contact with an infected person OR by sharing needles or syringes used by an infected person to inject drugs.

DO NOT DONATE if you:

- Have **EVER** taken any medication **to treat HIV infection**.
- Are taking any medication **to prevent HIV infection**. These medications may be called: PrEP, PEP, TRUVADA, DESCovy, APREtude or many other names.

FDA-approved antiretroviral drugs are safe and effective in preventing sexual transmission of HIV. However, these antiretroviral drugs do not fully eliminate the virus from the body, and donated blood can potentially still transmit HIV infection to a transfusion recipient.

DO NOT STOP TAKING ANY PRESCRIBED MEDICATIONS IN ORDER TO DONATE BLOOD, INCLUDING PrEP and PEP MEDICATIONS.

DO NOT DONATE if you:

- Have **EVER** had a positive test for HIV infection.
- **In the past 3 months:**
 - Have had sexual contact with a new partner **and** have had anal sex.
 - Have had sexual contact with more than one partner **and** have had anal sex.
 - Have had sexual contact with anyone who has ever had a positive test for HIV infection.
 - Have received money, drugs, or other payment for sex.

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- Have used needles to inject drugs, steroids, or anything not prescribed by your doctor.
- Have had sexual contact with anyone who has received money, drugs, or other payment for sex, **or** used needles to inject drugs, steroids, or anything not prescribed by their doctor.
- Have had syphilis or gonorrhea or been treated for syphilis or gonorrhea.
- **In the past 12 months:**
 - Have been in juvenile detention, lockup, jail or prison for 72 hours or more consecutively.
- Have **EVER** had Ebola disease.

DO NOT DONATE if you have these symptoms which can be present before you test positive for HIV:

- Fever
- Enlarged lymph glands
- Sore throat
- Rash

Your blood can transmit infections, including HIV, even if you feel well and all your tests are normal. Even the best tests cannot detect the virus for a period of time after you are infected.

DO NOT DONATE:

- If you think you may be at risk for HIV or other infections.
- If your purpose for donating is to obtain test results for HIV or other infections. Ask us where you can be tested for HIV and other infections.
- If your donation might harm the patient who receives your blood.

THANK YOU FOR DONATING BLOOD TODAY!

Marsh Regional Blood Center

Kingsport (423) 408-7500

Bristol (423) 652-0014

Johnson City (423) 282-7090

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Blood Donor Educational Material for Ebola Disease

Blood collection facilities must reduce the risk of collecting blood and blood components from a donor who may be infected with Ebola disease. It is possible that an individual with Ebola disease may not have symptoms of infection during the incubation period. In addition, anyone who has **EVER** had Ebola disease may be at risk for transmitting Ebola disease through blood donation, regardless of the length of time since recovery.

Ebola disease is transmitted from human to human by direct contact with the body fluids (such as blood, urine, stool, saliva, semen, vaginal fluids or vomit) of symptomatic individuals. Healthcare workers, and family and friends providing care may have direct exposure to blood or other body fluids of sick patients. If direct exposure occurs, a person is at high risk of developing Ebola disease and must not donate blood or blood components.

DO NOT DONATE BLOOD if:

- You have **EVER** had Ebola disease.
- In the **PAST 8 WEEKS**, you have lived in, or traveled to, a country with an Ebola disease outbreak.
- In the **PAST 8 WEEKS**, you have had sexual contact with a person who has **EVER** had Ebola disease, including a person under investigation in whom diagnosis is pending.
- In the **PAST 8 WEEKS**, you have had direct exposure to the body fluids (such as blood, urine, stool, saliva, semen, vaginal fluids or vomit) of a person with Ebola disease, including the body fluids of a person under investigation in whom diagnosis is pending.
- In the **PAST 8 WEEKS**, you have been notified by a public health authority that you may have been exposed to a person with Ebola disease.

PLEASE CONTACT THE DONOR CENTER, if you develop the following symptoms within the 8 week period following donation:

Fever

Severe Headache

Muscle Pain and Weakness followed by:

Fatigue

Diarrhea

Vomiting

Abdominal Pain

Hemorrhage (bleeding or bruising)

Medication Deferral List

CF105 Version 5.1 Effective Date: 8-18-25

DO NOT STOP taking medications prescribed by your doctor in order to donate blood.
Donating while taking these drugs could have a negative effect on your health or on the health of the recipient of your blood. PLEASE TELL US IF YOU:

ARE BEING TREATED WITH ANY OF THE FOLLOWING TYPES OF MEDICATIONS:	OR HAVE TAKEN:		WHICH IS ALSO CALLED:	ANYTIME IN THE LAST:
Antiplatelet agents (Usually taken to prevent stroke or heart attack) OK for Whole Blood Donations/Make no platelets	Feldene		piroxicam	2 Days
	Effient		prasugrel	3 Days
	Brilinta		ticagrelor	7 Days
	Plavix		clopidogrel	14 Days
	Ticlid		ticlopidine	
	Zontivity		vorapaxar	1 Month
Anticoagulants or “blood thinners” (usually taken to prevent blood clots in the legs and lungs and to prevent strokes)	Arixtra		fondaparinux	2 Days
	Eliquis		apixaban	
	Fragmin		dalteparin	
	Lovenox		enoxaparin	
	Pradaxa		dabigatran	
	Savaysa		edoxaban	
	Xarelto		rivaroxaban	
	Coumadin, Warfilone, Jantoven		warfarin	7 Days
	Heparin, low-molecular-weight heparin			
Acne treatment	Accutane Claravis Zenatane	Amnesteem Myorisan Sotret	isotretinoin	1 Month
Eye injection	Avastin		bevacizumab	4 Months
Multiple myeloma	Thalomid Revlimid		thalidomide lenalidomide	1 Month
Rheumatoid arthritis	Rinvoq		upadacitinib	1 Month
Hair loss remedy	Propecia		finasteride	1 Month
Prostate symptoms	Proscar		finasteride	1 Month
	Avodart Jalyn		dutasteride	6 Months
Immunosuppressant	Cellcept		mycophenolate mofetil	6 Weeks
Hepatitis exposure	Hepatitis B Immune Globulin		HBIG	3 Months
HIV prevention (also known as PrEP or PEP)	Any medication taken by mouth (oral) to prevent HIV.	Truvada	emtricitabine and tenofovir disoproxil fumarate	
		Descovy	emtricitabine and tenofovir alafenamide	
	Injectable HIV prevention	Apretude	Cabotegravir	2 Years
		Yeztugo	lenacapavir	
Basal cell skin cancer	Erivedge Odomzo		vismodegib sonidegib	2 Years
Relapsing multiple sclerosis	Aubagio		teriflunomide	
Rheumatoid arthritis	Arava		leflunomide	

Medication Deferral List

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ARE BEING TREATED WITH ANY OF THE FOLLOWING TYPES OF MEDICATIONS:	OR HAVE TAKEN:	WHICH IS ALSO CALLED:	ANYTIME IN THE LAST:
Psoriasis	Soriatane	acitretin	3 Years
	Tegison	etretinate	Ever
HIV treatment	Any medication to treat HIV. May also be called antiretroviral therapy (ART)		
Methotrexate (may be used to treat rheumatoid arthritis, lupus, psoriasis, cancer, ectopic pregnancy)	Amethopterin, Methotrexate Sodium MTX, Otrxup, Rheumatrex, Trexall	Methotrexate	3 months
Opiate withdrawal	Suboxone	Buprenorphine + naloxone	3 months
	Subutex	buprenorpine	
	Methadose***** *** no deferral if taken for chronic pain	Methadone***** *** no deferral if taken for chronic pain	
Experimental medication			12 months or as determined by the medical director

DO NOT STOP taking medications prescribed by your doctor in order to donate blood.

Adverse Effects Associated with Blood and Blood Product Donations

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Side effects associated with all types of blood donation procedures include:

- Fainting/Syncopal Reactions
- Headache
- Hematoma/Bruising
- Hyperventilation
- Hypovolemia (low blood volume)
- Iron Deficiency
- Lightheadedness
- Nausea
- Vomiting

Rare Effects include:

- Phlebitis-inflammation of the walls of a vein
- Infection
- Nerve irritation or damage
- Arterial injury
- Incontinence
- Seizures
- Cardiac problems

Reactions that are unique to apheresis collection procedures include:

- Allergic symptoms such as skin redness, itching, and hives.
- Chills (induced by infusion of room temperature saline or donor blood).
- Moderate hypocalcemia due to chelation of calcium by un-metabolized citrate (caused by infusion of anticoagulants containing citrate). Hypocalcemia is usually manifested by unusual taste or smell, tingling around the mouth or fingers, muscle discomfort, muscle twitching, nausea, or spasms.
- Severe hypocalcemia, although rare, includes tetany, convulsions, and cardiac arrhythmias.
- Rare complications may include blood loss, hemolysis, air embolism, and blood clotting, should an unexpected complication occur such as air embolus, hemolysis, blood clotting, irregular pulse, shock, hyperventilation, convulsions or cardiac difficulties, the procedure will be immediately terminated by the Blood Center staff.
- Long-term effects of repeated platelet apheresis on platelet and leukocyte counts are not known.

You will be closely monitored during the procedure to guard against these adverse reactions. Signs or symptoms of citrate toxicity are often mild and can be treated during the procedure by administering TUMS for calcium, slowing the reinfusion rate and/or pausing the procedure for a short period and giving saline. With any evidence of a more serious reaction, the procedure will be discontinued.

Predonation Information on Iron Deficiency and Maintaining Iron Balance Post Donation

Adapted from AABB Association Bulletin # 17-02, updated July 2022

Thank you for coming to donate blood.

We care about your health and want you to know that donating blood reduces iron stores in your body. In many people, this has no effect on their health. However, in some people, particularly younger donors (especially those age 16-20), premenopausal women, and frequent donors of either gender, blood donation may remove most of the body's iron stores. We want you to understand these issues more clearly.

What happens to me during a blood donation?

Red blood cells are red because of the way iron is carried in hemoglobin, a protein that brings oxygen to the body. Therefore, the removal of red blood cells during blood donation also removes iron from your body. The impact of this iron loss on your health varies among donors.

How does blood donation affect iron stored in my body?

Iron is needed to make new red blood cells to replace those you lose from donation. To make new red blood cells, your body either uses iron already stored in your body or uses iron that is in the food you eat. Many women have only a small amount of iron stored in their body, which is not enough to replace the red blood cells lost from even a single donation. Men have more iron stored in their body. However, men who donate blood often (more than two times per year) may also have low iron stores.

Does the blood center test for low iron stores in my body?

No, the blood center tests your hemoglobin but not your iron stores. Hemoglobin is a very poor predictor of iron stores. **You may have a normal amount of hemoglobin and be allowed to donate blood even though your body's iron stores are low.**

How may low iron stores affect me?

There are several possible symptoms associated with low iron stores. These include fatigue, decreased exercise capacity, and pica (a craving to chew things such as ice or chalk). In addition, having low iron stores may increase the possibility of having a low hemoglobin test, preventing blood donation.

What can I do to maintain my iron stores?

While eating a well-balanced diet is important for all donors, simply eating iron-rich foods **may not** replace all the iron lost from blood donation. To replace the iron lost in a whole blood donation, supplements containing 18 mg of elemental iron have been found to be effective. For example, a multivitamin with 18 mg of iron taken daily for 60 days has been found to be effective in replacing iron lost due to blood donation. Donors with hemoglobin values near the cut off for donation may benefit from supplements containing 18 mg of elemental iron.

Donors who donate double red cells may also benefit from taking supplements containing 18 mg of elemental iron daily for at least 60 days and up to 120 days after donating a double red cell product.

Donors who donate apheresis platelets and/or plasma frequently may not lose as much iron as donors who donate whole blood but over time these donors may also experience low iron stores over time, especially those whose hemoglobin is near the cut off for donation. These donors may also want to consider taking daily supplements containing 18 mg of elemental iron for 60 days after every 4th or 5th apheresis platelet and/or plasma donation.

Because iron supplements may be harmful in some individuals or mask conditions associated with blood loss from the digestive system (gastrointestinal blood loss), donors with a personal or family history of some conditions such as hereditary hemochromatosis, familial polyposis, or colorectal cancer should check with their health-care provider before taking iron supplements. Donors should also check with their health-care provider or pharmacists about the effects of iron on absorption of other medications.

Why doesn't a single big dose of iron replace what I lose during the donation?

Because people have a limit in iron absorption (i.e., 2-4 mg/day), taking iron in larger doses for a shorter period may not lead to better absorption (and may result in more side effects). The overall goal is to replace, over 1 to 3 months, 200-250 mg of iron lost during donation.