

Donor Education Material

READ THIS BEFORE YOU DONATE!

We know that you would not donate unless you think your blood is safe. However, in order for us to assess all risks that may affect you or a patient receiving a transfusion, it is essential that you answer each question completely and accurately. If you don't understand a question, ask the blood center staff. All information you provide is confidential.

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

- Ask about your health and travel
- Ask about medicines you are taking or have taken
- Ask about your risk for infections that can be transmitted by blood – especially AIDS and viral hepatitis
- Take your blood pressure, temperature and pulse
- Take a blood sample to be sure your blood count is acceptable

Travel to or birth in other countries

Blood donor tests may not be available for some infections that are found only in certain countries. If you were born in, have lived in, or visited certain countries, you may not be eligible to 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 new, sterile, disposable needle to collect your blood

WHAT HAPPENS AFTER YOUR DONATION

To protect patients, your blood is tested for several types of hepatitis, HIV, syphilis, and other infections. If your blood tests positive it will not be given to a patient. There are times when your blood is not tested. If this occurs, you may not receive any notification. You will be notified about any positive test result which may disqualify you from donating in the future. The blood center will not release your test results without your written permission unless required by law (e.g. to the Health Department).

DONOR ELIGIBILITY – SPECIFIC INFORMATION

Certain diseases, such as AIDS and hepatitis, can be spread through sexual contact and enter your bloodstream. We will ask specific questions about sexual contact.

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, and apply to any of the activities below, whether or not a condom or other protection was used:

- 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)

HIV/AIDS risk behaviors

HIV is the virus that causes AIDS. It is spread mainly by sexual contact with an infected person OR by sharing needles or syringes used by an infected person for injecting drugs.

Do not donate if you:

- Have ever had HIV/AIDS or have ever had a positive test for the HIV/AIDS virus
- Have used needles to take any drugs not prescribed by your doctor **IN THE PAST 3 MONTHS**
- Have taken money, drugs or other payment for sex **IN THE PAST 3 MONTHS**
- Have had sexual contact **IN THE PAST 3 MONTHS** with anyone who has ever had HIV/AIDS or has ever had a positive test for the HIV/AIDS virus, ever taken money, drugs or other payment for sex, or ever used needles to take any drugs not prescribed by their doctor
- Are a male who has had sexual contact with another male, **IN THE PAST 3 MONTHS**
- Are a female who has had sexual contact **IN THE PAST 3 MONTHS** with a male who has had sexual contact with another male **IN THE PAST 3 MONTHS**
- Have had syphilis or gonorrhea **IN THE PAST 3 MONTHS**
- Have been in juvenile detention, lockup, jail or prison for 72 or more consecutive hours **IN THE PAST 12 MONTHS**
- Have a history of Ebola virus infection or disease

DO NOT donate to get a test! If you think you may be at risk for HIV/AIDS or any other infection, do not donate simply to get a test. Ask us where you can be tested outside the blood center.

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DO NOT donate if you have these symptoms which can be present before an HIV test turns positive:

- Fever
- Enlarged lymph glands
- Sore throat
- Rash

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

IMPORTANT NEW INFORMATION

DO NOT DONATE if you:

- Are taking any medication to prevent HIV infection. These medications may be known by you under the following names: PrEP, PEP, TRUVADA, OR DESCOVY.
- Have taken such a medication in the past 3 months.
- Have EVER taken any medication to treat HIV infection.

DO NOT donate if your donation might harm the patient who receives the transfusion.

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BLOOD DONATION IS SAFE, BUT NOT WITHOUT RISKS.

These include:

- Light headedness
- Fainting
- Nausea and Vomiting
- Bruising
- Hypovolemia (decreased blood volume)
- Convulsions
- Hyperventilation
- Hematoma (Lump) at needle site

REACTIONS UNIQUE TO APHERESIS (automated) COLLECTION PROCEDURES INCLUDE:

- "Tingling" feeling around the mouth or fingers
- Muscle discomfort, twitching or spasms
- Unusual taste or smell sensations
- Allergic symptoms such as:
 - Skin redness
 - Itching
 - Hives
 - Difficulty breathing
- Shortness of breath (Dyspnea)
- Feeling of Warmth
- Fatigue
- Fever
- Headache
- Drop in Blood Pressure (Hypotension)
- Anxiety
- Chills

BLOOD DONOR EDUCATIONAL MATERIAL FOR EBOLA VIRUS DISEASE OR INFECTION

This information applies following the CDC's classification of one or more countries as having "widespread transmission or cases in urban areas with uncertain control measures".

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

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

DO NOT DONATE BLOOD if:

- You have **EVER** had Ebola virus disease or infection
- In the **PAST 8 WEEKS**, you have lived in, or traveled to, a country with widespread Ebola virus disease or infection.
- In the **PAST 8 WEEKS**, you have had sexual contact with a person has **EVER** had Ebola virus disease or infection, regardless of the length of time since recovery.
- 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 virus disease or infection, including a person under investigation.
- In the **PAST 8 WEEKS**, you have you been notified by a public health authority that you may have been exposed to a person with Ebola virus disease or infection.

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
Fatigue

followed by:

Diarrhea
Vomiting
Abdominal Pain
Hemorrhage (bleeding or bruising)

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MEDICATION DEFERRAL LIST

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 the health of the recipient of your blood.			
PLEASE TELL US IF YOU:			
Are being treated with 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)	Feldene	piroxicam	14 days (for platelet donations only)
	Effient	prasugrel	
	Brilinta	ticagrelor	
	Plavix	clopidogrel	
	Ticlid	ticlopidine	
	Zontivity	vorapaxar	1 month (for platelet donations only)
Anticoagulants or “blood thinners” (usually to prevent blood clots in the legs and lungs and to prevent strokes)	Xarelto	rivaroxaban	7 days
	Fragmin	dalteparin	
	Lovenox	enoxaparin	
	Pradaxa	dabigatran	
	Eliquis	apixaban	
	Savaysa	edoxaban	
	Coumadin Warfilone Jantoven	warfarin	
	Heparin, low molecular weight heparin		
	Arixtra	fondaparinux	
Acne treatment	Accutane Myorisan Amnesteem Sotret Absorica Zenatane Claravis	isotretinoin	1 month
Multiple myeloma	Thalomid	thalidomide	
Rheumatoid arthritis	Rinvoq	upadacitinib	
Hair loss remedy	Propecia	finasteride	
Prostate symptoms	Proscar	finasteride	
	Avodart Jalyn	dutasteride	6 months
Immunosuppressant	Cellcept	mycophenolate mofetil	6 weeks
HIV Prevention (PrEP and PEP)	Truvada, Descovy, Tivicay, Isentress	tenofovir, emtricitabine, dolutegravir, raltegravir	3 months
Basal cell skin cancer	Erivedge Odomzo	vismodegib sonidegib	2 years
Relapsing multiple sclerosis	Aubagio	teriflunomide	
Rheumatoid arthritis	Arava	leflunomide	
Hepatitis exposure	Hepatitis B Immune Globulin	HBIG	12 months
Experimental Medication or Unlicensed (Experimental) Vaccine			
Psoriasis	Soriatane	acitretin	3 years
	Tegison	etretinate	Ever
HIV treatment also known as antiretroviral therapy (ART)			

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MEDICATION DEFERRAL LIST

(CONTINUED)

Are being treated with the following types of medications:	or have taken:	which is also called:	anytime in the last:
Cancer treatment	Arimidex©	anastrozole	1 month
Cancer, fibroids, endometriosis	Lupron	leuprolide	
Cancer, psoriasis, rheumatoid arthritis	Methotrexate©		
Growth hormone from human pituitary glands			Ever

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

Some medications affect your eligibility as a blood donor for the following reasons:

Anti-platelet agents affect platelet function, so people taking these drugs should not donate platelets for the indicated time; however, you may still be able to donate whole blood or red blood cells by apheresis.

Anticoagulants or "blood thinners" are used to treat or prevent blood clots in the legs, lungs, or other parts of the body, and to prevent strokes. These medications affect the blood's ability to clot, which might cause excessive bruising or bleeding when you donate. You may still be able to donate whole blood or red blood cells by apheresis.

Isotretinoin, finasteride, dutasteride, acitretin, and etretinate can cause birth defects. Your donated blood could contain high enough levels to damage the unborn baby if transfused to a pregnant woman.

Thalomid (thalidomide), Erivedge (vismodegib), Odomzo (sonidegib), Aubagio (teriflunomide), and Rinvoq (upadacitinib) may cause birth defects or the death of an unborn baby if transfused to a pregnant woman.

Cellcept (mycophenolate mofetil) and Arava (leflunomide) are immunosuppressants which may cause birth defects or the death of an unborn baby if transfused to a pregnant woman.

PrEP or pre-exposure prophylaxis involves taking a specific combination of medicines as a prevention method for people who are HIV negative and at high risk of HIV infection.

PEP or post-exposure prophylaxis is a short-term treatment started as soon as possible after a high-risk exposure to HIV to reduce the risk of infection.

ART or antiretroviral therapy is the daily use of a combination of HIV medicines (called an HIV regimen) to treat HIV infection.

Hepatitis B Immune Globulin (HBIG) is an injected material used to prevent hepatitis B infection following a possible or known exposure to hepatitis B. HBIG does not prevent hepatitis B infection in every case; therefore, persons who have received HBIG must wait to donate blood.

Experimental medication or unlicensed (experimental) vaccine is usually associated with a research study, and the effect on the safety of transfused blood is unknown.

Arimidex and Lupron: These medications could potentially cause, or have been associated with, birth defects. Once the medication has been cleared from your blood, you may donate again.

Methotrexate: These medications are given for cancer and other chronic illnesses. You are deferred for your own safety. Methotrexate may cause birth defects.

Growth hormone from human pituitary glands was prescribed for children with delayed or impaired growth. The hormone was obtained from human pituitary glands, which are in the brain. Some people who took this hormone developed a rare nervous system condition called Creutzfeldt - Jakob disease (CJD, for short).

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After you donate:

- Take a 10-15 minute snack break in the canteen before leaving.
- Make sure you drink something, especially if you are driving OR it is a hot day.

FOR THE REST OF THE DAY

- No strenuous exercise or heavy lifting.
- Drink more non-alcoholic fluids than usual over the next 8-16 hours. We recommend at least 12 ounces of water every 2-3 hours.
- Do not smoke for approximately 2 hours after donation.
- If bleeding should occur after you leave, apply direct pressure to the area and raise your arm for at least 5 minutes then check to see if bleeding stops.
- If you feel faint or dizzy, immediately lie down or sit down with your head between your knees.
- If you experience difficulty-breathing, convulsions, chest pains, or throbbing/excruciating pain in the donation arm, seek immediate medical attention AND notify the Donor Advocate.

If you experience any of these or any other symptoms, contact our Donor Advocate at 815-961-2304, as soon as possible.

IF YOU ARE DEFERRED

You will receive an explanation for your deferral and the length of time you will be unable to donate. Staff will also note these on the information brochure for you to take home.

Please understand that we apply deferrals based on FDA legal requirements or AABB safety recommendations, and they are in place to ensure your safety and the safety of the patient who receives your donation.

Iron replacement after donation

We recommend that successful red cell or whole blood donors take an iron supplement daily for 60 days (8 weeks).

The amount of iron recommended is between 18-36 mg. (Please follow the manufacturers recommended dosage and do not take more than recommended for the product selected.)

- Multivitamin tablets labeled as containing iron may be used. (Most vitamins labeled "senior" or "silver" do not contain iron.)
- Different types of iron salts (e.g. sulfate and gluconate) seem to be equally effective.
- Some drug store chains have 28 mg ferrous gluconate tablets available at a low price.

Check with your doctor before taking iron if you or any family member has a history of:

- Hemochromatosis
- Familial polyposis
- Colon cancer

If you have any stomach or intestinal upset, stop the iron until you are free of symptoms.

On Behalf of the patients and their families THANK YOU for your willingness to donate blood and/or platelets. You are making a difference in the lives of many.