Beth Israel Lahey Health
Anna Jaques Hospital

Department of Pathology and Laboratory Services
AJH Main Laboratory and AJH Cancer Center Laboratory

Thank you for your interest! At the time of donation, you will be asked to sign a statement that says you have read and understand this information. If you have any questions, please ask the donor technician.

1. You will be required to present identification with your photo the first time you donate. We require the following:
   - Name
   - Date of birth
   - Social security number or Driver's License

2. We will do a mini-physical that includes checking:
   - Your temperature
   - Your blood pressure and pulse
   - A drop of blood to be sure that you have enough red blood cells to donate safely

3. You will be asked about your past and present health and lifestyle and we will answer any questions you may have. Honesty and accuracy is essential for the safety of the patients who receive your blood. *Note: This interview will be private and confidential.*
4. You will be given a form so you can let us know, privately, whether your blood is safe to give to another person.
5. We will cleanse the area of your arm you will be using to donate. All supplies, including the needle, are sterile and will only be used on you.
6. When we start the donation, you may feel a brief sting from the needle.
7. When you are finished, we will give you a form with:
   - Post donation instructions
   - A number to call if you decide after you leave that your blood may not be suitable for transfusion to another person

8. Although most people feel fine before and after donating blood, a small number of people may have an:
   - Upset stomach
   - Faint or dizzy feeling
   - Black and blue area at the needle site

   Note: Very rarely, a person may faint, have muscle spasms, and/or suffer nerve damage.

You should not give blood if you have:

- Had hepatitis on or after the age of 11
- Had malaria in the past 3 years
- Been held in a correctional facility (including jail, prison, or detention center) for more than 72 straight hours in the last 12 months
- Had or been treated for syphilis or gonorrhea or tested positive for syphilis in the last 3 months
- Been sexually assaulted in the last 3 months
- Had a blood transfusion (including RBC, plasma and platelets) in the last 3 months
- Have had HIV/AIDS or one of its symptoms, including:
  - unexplained weight loss (10 pounds or more in less than 2 months)
  - night sweats
  - blue or purple spots under the skin
  - long lasting white spots or unusual sores in your mouth
  - lumps in your neck, armpits, or groin, lasting longer than one month
  - diarrhea lasting longer than one month
  - persistent cough and shortness of breath, or
  - fever higher than 99°F lasting more than 10 days
- Done something that puts you at risk for becoming infected with HIV, the viruses that cause AIDS. You are at risk for getting infected with HIV if you have:
  - taken illegal or non-prescription drugs by needle, even once
  - tested positive for any AIDS virus
  - been given money for sex or drugs, since 1977
  - had a sexual partner who puts you at risk AIDS infection. This means:
    - you have had sex in the last 3 months with someone who is at risk for being infected with the AIDS virus
    - if you are male, had sex, even once with another male in the past 3 months; or within 3 months, given a female money or drugs to have sex with you, or
    - if you are female, within the last twelve months, given anyone money or drugs to have sex with you; or had a male sex partner who had sex with another male within the past 3 months, even once.

Ineligible Donors:

We maintain a confidential list of people who may be at risk for spreading transfusion-transmitted diseases. When required, we report donor information, including test results, to health departments, medical commands, and regulatory agencies, as required by law.

Decision to Donate:

You may stop the donation process at any time, without prejudice.

Testing your Blood:

Per FDA and CDC guidelines, your blood will be tested for infectious diseases such as syphilis, HIV, hepatitis, West Nile virus, Zika virus and Babesia. We will notify you if tests show you may be unhealthy. Your blood will not be used in the case of a positive infectious disease test.

DO NOT give blood to find out whether you test positive for the AIDS virus or other infection. Though the tests performed are excellent, a very recent infection will may still produce a negative test result. That is why you must not give blood if you are at risk of getting AIDS or other infectious diseases. We can tell you how to get tested for HIV anonymously.

Travel to or Birth in Other Countries:

Blood donor tests may not be available for infectious diseases that are found in certain countries. If you have been born in, or lived in, or visited certain countries, you may not be eligible to donate. Most travel/residential restrictions are not permanent and you may donate when the deferral period has passed.

Health Information:

Please let us know if you have any heart or lung problems (cardiac stents, pace maker, emphysema, etc.), as some conditions may require you to obtain prior authorization from your physician to ensure it will be safe for you to donate your blood.

Tattoos and/or Body Piercing:

You are eligible to donate 3 months from the date of your last tattoo or body piercing.

Medications:

Please review the following medication list and note that some medications may make you ineligible to donate, either permanently, or for a certain time period. **NOTE:** Never discontinue a prescribed medication in order to donate.

Iron Deficiency:

Enclosed you will find information on blood donation and iron depletion. Please review this information.

SOME MEDICATIONS MAY AFFECT YOUR ELIGIBILITY TO DONATE BLOOD **PLEASE TELL US IF YOU HAVE TAKEN THE FOLLOWING WITHIN THE TIME FRAMES INDICATED**			
Anticoagulants or "blood thinners" (usually to prevent blood clots in the legs and lungs and to prevent strokes)	Xarelto	rivaroxaban	2 days
	Fragmin	dalteparin	
	Lovenox	enoxaparin	
	Pradaxa	dabigatran	
	Eliquis	apixaban	
	Savaysa	edoxaban	
	Coumadin Warfilone Jantoven	warfarin	7 days
	Heparin, low molecular weight heparin (unless listed separately)	heparin	
	Arixtra	fondaparinux	
Influenza treatment	Tamiflu	oseltamivir phosphate	1 Month
Acne treatment	Accutane Amnesteem Absorica Claravis Myorisan Sotret Zenatane	isotretinoin	
Hair loss remedy	Propecia	finasteride	
Prostate symptoms	Proscar	finasteride	
	Avodart Jalyn	dutasteride	6 Months
Basal cell skin cancer	Erivedge	vismodegib	2 years
Relapsing multiple sclerosis	Aubagio	teriflunomide	2 years
Psoriasis	Soriatane	acitretin	3 years
	Tegison	etretinate	Ever
Hepatitis exposure	Hepatitis B Immune Globulin	HBIG	12 months
Testosterone Therapy			Deferred for plasma donation during treatment
Experimental Medication or Unlicensed (Experimental) Vaccine			12 months, or as indicated by Medical Director

DO NOT discontinue medications prescribed or recommended by your physicians in order to donate blood.

WHY THESE MEDICATIONS AFFECT YOU AS A BLOOD DONOR:

- If you have taken or are taking **Proscar, Avodart, Jalyn, Propecia, Accutane, Absorica, Amnesteem, Claravis, Myorisan, Sotret, Zenatane, Soriatane, Tegison, Erivedge or Aubagio**, these medicines can cause birth defects. Your donated blood could contain high enough levels to damage the unborn baby if transfused to a pregnant woman. Once the medication has been cleared from your blood, you may donate again. Following the last dose, the deferral period is one month for Proscar, Propecia, Accutane, Absorica, Amnesteem, Claravis, Myorisan, Sotret and Zenatane, six months for Avodart and three years for Soriatane. Tegison is a permanent deferral.

- **Anticoagulants or 'blood thinners'** are used to treat or prevent blood clots. These medications affect the blood's ability to clot, which might cause excessive bruising or bleeding when you donate.

- **Hepatitis B Immune Globulin (HBIG)** is an injected material used to prevent infection following exposure to hepatitis B. HBIG does not prevent hepatitis B in every case; therefore, persons who have received HBIG must wait 12 months to be sure they were not infected since hepatitis B can be transmitted through transfusion.

- **Feldene** is a non-steroidal anti-inflammatory drug that can affect platelet function. A donor taking Feldene will not be able to donate platelets for two days, but red cell and plasma donations are accepted.

- **Plavix and Ticlid** are medications that can decrease the chance of a heart attack or stroke in individuals at risk for these conditions. Since these medications can affect platelets, anyone taking Plavix or Ticlid will not be able to donate platelets for 14 days after the last dose. Use of either medication will not prohibit Red cell and Plasma donations.

- Elevated **Testosterone** levels in plasma or platelets could potentially affect some patient populations that receive transfusions, such as neonates. Red cell collection is acceptable.

- **Tamiflu© (oseltamivir phosphate)** may cause complications in ESRD recipients. Not adequately evaluated for effect in pregnancy and on nursing infants.

- **Experimental Medication or Unlicensed (Experimental) Vaccine** - usually associated with a research protocol and the effect on blood donation is unknown. Deferral is one year unless otherwise indicated by Medical Director.

Pre-Donation Information on Iron Deficiency

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, with some younger 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. In this process, your body either uses iron stored in your body or iron from 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, but men who donate blood often (more than twice 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. ***You may have a normal hemoglobin test and be allowed to donate blood even if your body's iron stores are low***.

How may low iron stores affect me?

Symptoms associated with low iron stores may include: fatigue, decreased exercise capacity, difficulty concentrating and pica (a craving to chew things such as ice or chalk). 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?

Eating a well-balanced diet is important for all donors, but eating iron-rich foods ***may not*** replace all the iron lost from blood donation. Taking multivitamins with iron or iron supplements may help replace iron lost. Iron supplements vary, so your physician or pharmacist should assist you in deciding what dose, type, and duration of iron supplement to choose. Before taking an iron supplement, you should always consult with your health-care provider.

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

Daily iron absorption is limited (2-4 mg/day), so taking iron in larger doses 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 (or 470 mg for a double RBC donation).

Prepared by the AABB Inter-organizational Task Force on Donor Hemoglobin Deferral