

Blood 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/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.

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

- Fever
- Enlarged lymph glands
- 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 (antiretroviral therapy or ART).**
- **The principle known as “Undetectable = Untransmittable” does not apply to the potential risk to patients who receive transfusions.**

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

THANK YOU FOR DONATING BLOOD TODAY!

SunCoast Blood Centers
941-954-1600

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 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)	Feldene	piroxicam	2 Days (PLTs only)	
	Effient	prasugrel	3 Days (PLTs only)	
	Brilinta	ticagrelor	7 Days (PLTs only)	
	Plavix	clopidogrel	14 Days (PLTs only)	
	Ticlid	ticlopidine		
	Zontivity	vorapaxar	1 Month (PLTs only)	
Anticoagulants or "blood thinners" (usually taken to prevent blood clots in the legs and lungs and to prevent strokes)	Arixtra	fondaparinux	2 Days (all donation types)	
	Eliquis	apixaban		
	Fragmin	dalteparin		
	Lovenox	enoxaparin		
	Pradaxa	dabigatran		
	Savaysa	edoxaban		
	Xarelto	rivaroxaban	7 Days (all plasma products)	
	Coumadin, Warfilone, Jantoven	warfarin		
Heparin, low-molecular-weight heparin				
Acne treatment	Accutane Amnesteem Absorica Claravis	Myorisan Sotret Zenatane	isotretinoin	1 Month (all donation types)
Multiple myeloma	Thalomid		thalidomide	
Rheumatoid arthritis	Rinvoq		upadacitinib	
Hair loss remedy	Propecia		finasteride	
Prostate symptoms	Proscar		finasteride	6 Months (all types)
	Avodart Jalyn		dutasteride	
Immunosuppressant	Cellcept		mycophenolate mofetil	6 Weeks (all types)
HIV Prevention (PrEP and PEP)	Truvada, Descovy, Tivicay, Isentress		tenofovir, emtricitabine dolutegravir, raltegravir	3 Months (all types)
Basal cell skin cancer	Erivedge Odomzo		vismodegib sonidegib	24 Months (all types)
Relapsing multiple sclerosis	Aubagio		teriflunomide	
Rheumatoid arthritis	Arava		leflunomide	
Hepatitis exposure	Hepatitis B Immune Globulin		HBIG	12 months (all types)
Experimental Medication or Unlicensed (Experimental) Vaccine				
Psoriasis	Soriatane		acitretin	36 Months (all types)
	Tegison		etretinate	Ever (all types)
HIV treatment also known as antiretroviral therapy (ART)				

Medication Deferral List

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:

Antiplatelet agents affect platelet function, so people taking these drugs should not donate platelets for the indicated time. 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 that 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.

SunCoast Blood Bank
Sarasota, FL

DONOR EDUCATION

Risks of Post Donation Iron Deficiency

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 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. Taking multivitamins with iron or iron supplements either prescribed or over the counter (from a drugstore) may help replace iron lost. Iron supplements vary in name and proportion of iron within the tablet/caplet. The most effective dose, type of iron supplement, and length of treatment are currently being studied. Current recommendations range from one typical multivitamin with iron (19 mg iron) to elemental iron caplets (45 mg iron) for six weeks to three months. Your physician or pharmacist may be able to assist you in deciding what dose, type, and duration of iron supplement to choose.

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

Because people have a limit in iron absorption (ie, 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.

Where can I get additional information?

Individual blood centers should complete this paragraph. They may wish to refer donors to a local expert, or a local website. There are also established internet sites with expertise that may be helpful for donors, including www.anemia.org

Prepared by the AABB Interorganizational Task Force on Donor Hemoglobin Deferrals

SunCoast Blood Bank
Sarasota, FL

**BLOOD DONOR EDUCATIONAL MATERIAL FOR
EBOLA VIRUS DISEASE OR INFECTION**

For use during periods without widespread transmission

Please DO NOT DONATE BLOOD if you

- Have **EVER** had Ebola virus disease or infection

**BLOOD DONOR EDUCATIONAL MATERIAL FOR
EBOLA VIRUS DISEASE OR INFECTION**

For use during periods with widespread transmission

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" at this link: <http://www.cdc.gov/yhf/ebola/outbreaks/2014-west-africa/distribution-map.html>.

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 travelled 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)