BLOOD DONOR EDUCATIONAL MATERIAL

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).

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.

PLEASE CONTINUE READING ON SIDE 2!!

Blood Donor Educational Material

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.
  - 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 virus infection or 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!

Community Blood Bank of NWPA and Western NY

2646 Peach St, Erie, Pa 16508
814-456-4206
www.fourhearts.org

Additional Information

The five key steps that ensure the safety of the U.S. blood supply

01 DONOR HISTORY QUESTIONNAIRE



All prospective donors who visit a U.S. blood center must complete an FDA-required donor history questionnaire (DHQ) before each donation. During this process all prospective donors are asked the same series of eligibility questions to ensure they can safely donate.



02 DONOR DEFERRAL HISTORY

Information on prospective donors who were temporarily or permanently deferred from donating is recorded by blood centers as required by the FDA. This allows blood collectors to review the donation history of all prospective donors during each donation attempt and ensure those who have a history of deferrals are not able to donate blood for patient transfusion.



03 PROCESSING AND TESTING OF EVERY DONATION

Every blood donation undergoes sophisticated laboratory processing and testing as required by the FDA. More than 12 tests are performed on every donation to identify the blood type and make sure the blood is safe for transfusion. All donated blood is held in quarantine and not released until all infectious disease testing is confirmed negative.

04 RIGOROUS QUALITY STANDARDS

After the testing process, donated blood components are stored according to Current Good Manufacturing Processes (cGMPs) until they are needed for patient transfusion. Red blood cells can be stored for up to 42 days, plasma and cryoprecipitated AHF can be frozen and stored for up to 12 months, and platelets, depending on the manufacturing process, must be used within 7 days.



05 LOCAL AND NATIONAL MONITORING



The FDA closely monitors the safety of the blood supply and transfusions through such mechanisms as the U.S. Department of Health and Human Services' (HHS) Transfusion Transmissible Infectious Monitoring System (TTIMS). TTIMS and other data sources continue to assist the FDA in providing the best science-backed guidance to U.S. blood centers.

Medication Deferral List (DHQ/aDHQ v4.0)

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
	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 Amnesteem Absorica Claravis Myorisan Sotret Zenatane		isotretinoin	1 Month
Multiple myeloma	Thalomid		thalidomide	
	Revlimid		lenalidomide	
Rheumatoid arthritis	Rinvoq		upadacitinib	
Hair loss remedy	Propecia		finasteride	
Prostate symptoms	Proscar		finasteride	
	Avodart Jalyn		dutasteride	6 Months
Immunosuppressants	CD19/CD20 /CD52 B-cell depleting monoclonal antibody therapy	Briumvi	ublituximab	
		Gazyva	obinutuzumab	
		Kesimpta	ofatumumab	
		Lemtrada	alemtuzumab	
		Ocrevus/Ocrevus Zunovo	ocrelizumab	
		Rituxan/Riabni/Ruxience	rituximab	
		Truxima	rituximab	
		Uplizna	inebilizumab	
	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 Yeztugo	cabotegravir lenacapavir	**2 Years**
Basal cell skin cancer	Erivedge Odomzo		vismodegib sonidegib	**2 Years**
Relapsing multiple sclerosis	Aubagio		teriflunomide	
Rheumatoid arthritis	Arava		leflunomide	
Psoriasis	Soriatane		acitretin	**3 Years**
	Tegison		etretinate	**Ever**
HIV treatment	Any medication to treat HIV. May also be called antiretroviral therapy (ART)			
Growth hormone from human pituitary glands				**Ever**
Experimental medication				**As defined by the medical director**

PLEASE NOTE: THIS LIST IS *NOT ALL INCLUSIVE* AND YOU MAY BE ASKED ABOUT OTHER MEDICATIONS YOU ARE TAKING.

The following information is included to assist the donor historian when providing additional information to the donor concerning their deferral:

Some medications may affect donor eligibility 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), Revlimid (lenalidomide), 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 oral medicines (i.e., short-acting antiviral PrEP) or injections (i.e., long-acting antiviral PrEP) as a prevention method for people who are HIV negative and at high risk of HIV infection. FDA has determined that the available data demonstrate that the use of PrEP or PEP may delay the detection of HIV by currently licensed screening tests for blood donations, potentially resulting in false negative results in infected individuals. Although "Undetectable = Untransmittable" for sexual transmission, this **does not apply to transfusion transmission**.

PEP or post-exposure prophylaxis is a short-acting treatment started as soon as possible after a high-risk exposure to HIV to reduce the risk of infection. FDA has determined that the available data demonstrate that the use of PrEP or PEP may delay the detection of HIV by currently licensed screening tests for blood donations, potentially resulting in false negative results in infected individuals. Although "Undetectable = Untransmittable" for sexual transmission, this **does not apply to transfusion transmission**.

ART or antiretroviral therapy is the use of a combination of HIV medicines (called an HIV regimen) to treat HIV infection. HIV infection requires a permanent deferral despite treatment with ART. Antiretroviral drugs do not fully eliminate the virus from the body, and donated blood from individuals infected with HIV taking ART can potentially still transmit HIV to a transfusion recipient. Although "Undetectable = Untransmittable" for sexual transmission, this **does not apply to transfusion transmission**.

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 medications are usually associated with a research study, and their effect on the safety of transfused blood is unknown.

CD19/CD20/CD52 B-cell depleting monoclonal antibody therapy: Theoretical risk exists related both to undetected donor viremia and the potential transfer of therapeutic monoclonal antibodies to recipients.

Community Blood Bank of Erie County
2646 Peach Street, Erie, PA 16508

BLOOD DONOR EDUCATIONAL MATERIAL
IRON INFORMATION FOR FREQUENT AND SUSCEPTIBLE DONORS

Iron and Blood Donation
Donating a unit of whole blood, double red blood cells, or platelets removes iron from your body. You need iron to make new red blood cells. Iron deficiency may affect your health.

Am I a frequent blood donor or do I fall into a susceptible group?
A Frequent Blood Donor is defined as:

- Males donating three or more red blood cell units within a 12-month period or five or more platelet pheresis donations in an 8-week period.
- Females donating two or more red blood cell units within a 12-month period or five or more platelet pheresis donations in an 8-week period.

Susceptible groups are:

- Young Donors: Age 16-18
- Premenopausal females
- Donors with hemoglobin values near the minimum eligibility (e.g. Males with hemoglobin between 13.0 g/dL and 13.5 g/dL and females with hemoglobin between 12.5 g/dL and 13.0 g/dL).

If I could give blood today, does that mean that I have enough iron?
Prior to donating, CBB tests for your hemoglobin level. The **hemoglobin** test measures the amount of hemoglobin in your red blood cells. It does not measure the level of iron in your body. Even if you qualify for blood donation, you may have low iron reserves.

What are some of the symptoms of iron deficiency?
- Fatigue
- Weakness
- Pale skin
- Chest pain, fast heartbeat or shortness of breath
- Headache, dizziness or lightheadedness
- Cold hands and feet
- Inflammation or soreness of your tongue
- Brittle nails
- Unusual cravings for non-nutritive substances, such as ice, chalk, dirt or starch
- Poor appetite

Should frequent and susceptible blood donors replace the iron they lose with each blood donation?
Community Blood Bank recommends that frequent and susceptible blood donors should consider taking a multi-vitamin containing iron or an iron-only supplement to replace the iron lost with each donation. You should **discuss taking these measures with your health-care provider** before adding it to your routine. Iron supplements may be harmful in some individuals or mask conditions associated with gastrointestinal blood loss, donors with a personal or family history of hereditary hemochromatosis, familial polyposis, or colorectal cancer.

What are the typical benefits to iron supplementation?
- Prevents significant iron depletion
- More energy
- Quicker recovery of iron stores.
- Maintaining healthy iron levels will allow donors to safely continue donating thereby ensuring a robust blood supply for patients in need.

Where can I get iron supplements?
Iron is available as an over the counter medicine at drug stores, health food stores and grocery stores without a prescription as well as through the internet. Prices and doses vary greatly.

How much iron should I take?
Recommendation:

- **CHECK WITH YOUR HEALTH-CARE PROVIDER BEFORE COMMENCING IRON SUPPLEMENTATION.**
- **CONSULT WITH YOUR HEALTH-CARE PROVIDER OR PHARMACIST ABOUT THE EFFECT OF IRON SUPPLEMENTATION ON ABSORPTION OF OTHER MEDICATIONS.**

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" at this link: https://www.cdc.gov/ebola/situation-summary/index.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 COMMUNITY BLOOD BANK, if you develop the following symptoms within the 8-week period following donation:

Fever		**Diarrhea**
Severe Headache	**followed by:**	**Vomiting**
Muscle Pain and Weakness		**Abdominal Pain**
Fatigue		**hemorrhage (bleeding or bruising)**

THANK YOU FOR DONATING BLOOD TODAY!

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COMMUNITY BLOOD BANK
Community Comes First