

BLOOD DONOR Educational Materials

Please read all of the following donor educational materials.

History questions preceded by “NEW” indicate a new or revised question (2020).

Your understanding of this information is critical to the success of your donation and the safety of the patient receiving your donation.

MAKING YOUR BLOOD DONATION SAFE

Thank you for coming in today! This information explains how **YOU** can help us make the donation process safe for yourself and patients who might receive your blood.

PLEASE READ THIS INFORMATION BEFORE YOU DONATE!

If you have any questions now or any time during the screening process, please ask Bloodworks staff.

ACCURACY AND HONESTY ARE ESSENTIAL

Your **complete honesty** in answering all questions is very important for the safety of patients who receive your blood.

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 Bloodworks staff.

All information you provide is confidential.

Bloodworks may contact you by phone, email, text message, or physical mail in the future at the addresses and numbers you provided regarding donation follow-up, appointments, eligibility for future donations, special programs, and events. Personal contact information will be kept confidential and used by Bloodworks staff, volunteers, or partner organizations obligated under organizational confidentiality and working on behalf of Bloodworks.

If you wish to change or remove your contact preferences, please call 1-800-398-7888.

DO YOU HAVE A “COLD”?

A “cold” is defined as an upper respiratory infection. The following symptoms indicate an infection which can spread through transfusion to someone else:

- Fever or chills
- Muscle aches
- Malaise
- Sore throat
- Yellow or green discharge from nose or sinuses
- Productive cough
- Tender or swollen lymph nodes

You should not donate if you are currently experiencing symptoms of a “cold”.

Thank you for donating blood today!

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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.

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.

THANK YOU FOR DONATING BLOOD TODAY!

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During your donation Staff will:

- Use only sterile, disposable, single-use equipment for each step of the process
- Select the most suitable vein(s)
- Explain the procedure and answer any questions you may have
- Monitor you for any possible side effects
- Ask that you stay awake through the entire procedure

After your donation:

Your blood donation will be tested for various infectious agents, including HIV and hepatitis. However, there are circumstances in which infectious disease tests cannot be performed. Your blood may be tested by DNA techniques for cell markers important for providing transfusion. Your blood may also be tested for factors that may affect the health of individuals receiving your blood, or components made from your blood. If we become aware of any results that are of importance to your health or that affect your eligibility to donate, we will notify you. To better interpret and understand the results of such studies or tests, it may be necessary to contact you for follow-up testing. All donor records are strictly confidential. However, local law requires that Bloodworks report to the local health department the names of all persons with confirmed positive tests for certain infectious agents. Donor records may be reviewed by regulatory agencies and manufacturers of donor tests; in the latter instance, donor identification is concealed.

Other Potential Uses of Your Donation:

A portion of your donation not used for transfusion may be used for quality control or investigational purposes by Bloodworks investigators and other members of the scientific and biomedical community. All information that could identify you will be removed before releasing samples or test information outside of Bloodworks. If DNA is analyzed, whole genome studies will not be performed. Bloodworks may contact you for participation in research studies. If you are contacted about research, it is always your choice whether or not you want to participate. Additional information is provided in the brochure entitled, "How Does Your Donation Go Further."

Please do not donate to get tested for HIV, hepatitis, or any other infections!



BLOOD DONOR Educational Materials

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
	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	
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/AIDS Prevention	Truvada, Descovy, Tivicay, Isentress	tenofovir, emtricitabine dolutegravir, raltegravir	3 Months
	Pre Exposure Prophylactic (PrEP) or Post Exposure Prophylactic (PEP)		
Basal cell skin cancer	Eriveg Odomzo	vismodegib sonidegib	24 Months
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	36 Months
	Tegison	etretinate	Ever
HIV/AIDS	Highly Active Antiretroviral Therapy (HAART) or Antiretroviral Therapy (ART)		

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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.



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Variant Creutzfeldt-Jakob Disease (vCJD) Countries of Risk

United Kingdom	Europe
<ul style="list-style-type: none">• Channel Islands (Jersey, Guernsey, Sark, Alderney)• England• Falkland Islands• Gibraltar• Isle of Man• Northern Ireland• Scotland• Wales	<ul style="list-style-type: none">• France• Ireland

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RISKS AND HAZARDS OF BLOOD DONATION

IRON DEPLETION (ALL DONORS)

Maintain Healthy Iron Levels

- Iron. Your body – and everybody needs it! Iron is an essential mineral that helps move oxygen to all organs, muscles and tissues in your body. It helps turn food into energy. Your good health depends on iron, just as we depend on you as a blood donor.
- That is why every time you donate we measure your red blood cell (RBC) level: how many red blood cells you have in circulation. Your RBC level normally remains at a set point unless (or until) your stored iron becomes depleted. We want to prevent you from ever experiencing depleted iron stores.
- In the days and weeks after you donate, your body naturally absorbs iron to replace what is lost. Once your iron stores are replaced, your body stops absorbing iron – to prevent having too much iron in the body.

Frequent donors may need help

- If you give blood as frequently as 3 times a year, including apheresis collections, recent studies have shown you are likely to need iron supplements.

For tips to increase your iron level, please ask staff for more information.

POTENTIAL SIDE EFFECTS OF BLOOD DONATION (ALL DONORS)

Complications after blood donation are uncommon, but about 3-10% of blood donors may experience some side effects. The most common side effect is bruising at the needle site. A less common side effect is fainting within a few minutes to a few hours after donation. A rare side effect is potential nerve and blood vessel injury from the needle stick. You will be provided after-care instructions for potential side effects after your collection.

APHERESIS DONORS ONLY (Platelet, Plasma, Red Cell, Granulocyte)

It is important that you let the Apheresis Staff know if you develop ANY of the following side effects DURING donation so steps can be taken to alleviate your symptoms:

- | | | |
|--|---|---|
| <ul style="list-style-type: none">• Anxiety• Tingling around the face and/or fingers• Fever and/or chills• Cold, clammy skin• Light headedness | <ul style="list-style-type: none">• Dizziness• Headache• Fainting• Bruising or swelling• Rapid, shallow breathing• Shortness of breath | <ul style="list-style-type: none">• Irregular heartbeat• Muscle discomfort, twitching, or spasms• Nausea and/or vomiting• Unpleasant taste sensation• Hives or an allergic reaction• Skin redness or itching |
|--|---|---|
- Apheresis donations may be collected more frequently than whole blood, and each type of donation has a specific waiting period to the next type of donation.
 - A malfunction of the instrument or operating conditions may cause the procedure to be discontinued early and can result in blood loss (less than one pint), hemolysis, air embolism, or clotting.
 - Each donor's annual red cell and plasma loss limits are monitored, and donors may be deferred up to 16 weeks if those limits are met.

If you have any questions about blood donation, please ask staff for more information.

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INFORMATION ABOUT EMERGING DISEASES

Ebola Virus Disease Or Infection

Please **DO NOT DONATE BLOOD** if you have **EVER** had Ebola virus disease or infection.

Zika Virus, Dengue Virus, and Chikungunya (CHIKV) Virus Outbreak

We want you to know information that is important for patients who may receive your blood and that may also be important to your own health.

Travel may put you at risk of getting infections not typically found in the United States. Of most concern at this time are tropical diseases caused by Zika, dengue, and chikungunya viruses, which are transmitted to humans by infected mosquitoes. Although you may feel completely well and healthy at the time of your donation, you may still have been infected with Zika, dengue, or chikungunya virus during your travel and not feel anything.

In this situation, you may develop symptoms within 2 weeks after your travel including:

- Fever \geq 100 F
- Muscle and/or joint aches or weakness
- Headache
- Eye pain
- A rash
- Bleeding or easy bruising (unrelated to your blood donation)

If you have traveled to any island in the Caribbean during the two weeks before your donation, please wait until 2 weeks after your return to donate. Please speak to a staff person to reschedule your appointment.

If you develop an unexplained illness with two or more of the listed symptoms within the next 2 weeks, PLEASE see your doctor and notify us as soon as possible at **(206) 398-5999**. By doing so, you may prevent infecting a patient receiving a transfusion.

Thank you for donating blood today!



We're all connected by blood



UPDATE: COVID-19 and Blood Donation

DO NOT DONATE BLOOD TODAY IF:

- In the past **14 days** you have had any symptoms of COVID-19
- In the past **14 days** you have had a positive diagnostic (nasal swab) test for COVID-19, but you never developed symptoms
- In the past **14 days** you have been under self-quarantine for COVID-19 exposure or risk

Please **do not donate for at least 14 days** after resolution of symptoms, or the date of a positive diagnostic (nasal swab) test, whichever is longer.

- If you are diagnosed with COVID-19 at any time after donation, please contact us: **(425) 656-3077**.

Additionally, the normal donor screening process includes evaluation of your health today, including your temperature. All of our donation criteria helps us assure blood safety.

If you are healthy, and without the above conditions, for at least 14 days **we welcome you to donate**. To date, CDC, FDA and local Public Health standards continue to allow blood donation from others who are well, including:

- *Potential* community or household exposure
- *Known* community or workplace exposure

Bloodworks is taking these steps in accordance with published FDA and CDC information. We will update our processes as more information becomes available. **The Washington State Department of Health has established a call center to address questions from the public. If you have questions about what is happening in Washington, how the virus spreads, and what to do if you have symptoms, please call 1-800-525-0127 and press #.**

Thank you for helping save lives in our community!