Blood Donor Educational Materials

Please read before filling out the Donor History Questionnaire (DHQ) to help with any questions you may have.

- Donor Demographic Information
- Making Your Donation Safe
- Medication Deferral List
- Parental Consent Information

Blood Bank of Hawaii

DONOR DEMOGRAPHIC INFORMATION

The demographic information that you provide is a critical part of ensuring your identity, eligibility, and safety of the blood supply. It is also an integral part of communication between the Blood Bank of Hawaii and our donors.

- Please help us by ensuring that the information printed at the top of your Donor History Questionnaire is accurate and current.

Note: *Please ensure to provide us with a postal address where you may be contacted for 8 weeks after this donation.*

The Blood Bank of Hawaii is currently investing in communication technology to better inform our donors of potential donation opportunities and information.

- Please assist us by providing the following information to update our system:
    - Cell Phone Number
    - Employer
    - Email

Information for Transgender and Non-binary Donors

Blood Bank of Hawaii strives to be an organization supporting diversity, equity and inclusion in our community, and committed to providing a safe donor experience. We welcome and encourage donors to share their gender identity if it differs from their sex assigned at birth. Because transgender and non-binary donors may be undergoing therapies that affect their hemoglobin level or blood volume, we will use the male hemoglobin range for blood donation to ensure the safest possible experience. In addition, for collections that vary by blood volume (like automated apheresis blood donation), we use more conservative female collection ranges. Unfortunately, due to limitations in our BECS (Blood Establishment Computer System) we are unable to enter a non-binary gender when registering donors- we must ask you to choose a gender (male or female) that you identify with the most. Please understand we will be unable to edit your chosen gender once your donor profile is created.

Ethnicity Codes

Certain blood types, including rare ones, are found most commonly in certain ethnicities. Ethnicity data helps us look for these types more efficiently and provide this blood more rapidly to the patients in need.

- Please help us by choosing an ethnicity from the table below that you identify with the most:

Ethnicity	Code	Ethnicity	Code
Declined	1	Chinese	11
Mexican/Chicano	2	Japanese	12
Puerto Rican	3	Native Hawaiian	13
Cuban	4	Korean	14
Other Hispanic/Spanish	5	Guamanian/Chamorro	15
White/Caucasian	6	Filipino	16
Black/African American	7	Vietnamese	17
Caribbean	8	Samoan	18
American Indian/Alaska Native American	9	Other Asian	19
Indian/Pakistani	10	Other Pacific Islander	20

MAKING YOUR DONATION SAFE

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).

Additional testing for markers by conventional and/or research methods may be performed to further ensure the quality and safety of the blood. Collected blood is used for transfusion although some products or samples may be used to provide additional resources used in the care of patients. For research conducted to improve blood safety and contribute to advancing biomedical knowledge, the blood center may use donor history form data, perform additional laboratory testing, and/or store a sample of blood, all in a confidential manner.

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, 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)

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 behaviors

HIV is the virus that causes AIDS. HIV and hepatitis are 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 a positive test for the **HIV/AIDS** virus

- **In the past 3 months you:**
  - 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 syphilis or gonorrhea or been treated for syphilis or gonorrhea

MAKING YOUR DONATION SAFE

Do not donate if you:

- **In the past 12 months:**
  - Have been in juvenile detention, lockup, jail or prison for 72 or more consecutive hours
- Have a history of Ebola virus infection or disease

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.

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

IMPORTANT NEW INFORMATION
DO NOT DONATE if you:

- **Are taking any medication by mouth 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 received an injection of medication to prevent HIV infection- this medication may be known to you as Yeztugo (lenacapavir) (long acting PrEP) or APRETUDE (i.e., long-acting antiviral PrEP or PEP).**
- **Have received this medication in the past 2 years.**
- **Have EVER taken any medication to treat HIV infection.**

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 ANY PRESCRIBED MEDICATIONS IN ORDER TO DONATE BLOOD, INCLUDING PrEP AND PEP MEDICATIONS.

Blood Donor Educational Material for Ebola Disease:

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

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

DO NOT DONATE BLOOD if:

- You have **EVER** had Ebola disease
- In the **PAST 8 WEEKS,** you have lived in, or travelled to, a country with an Ebola disease outbreak.
- In the **PAST 8 WEEKS,** you have had sexual contact with a person who has **EVER** had Ebola disease, including a person under investigation in whom diagnosis is pending.
- In the **PAST 8 WEEKS,** you have had direct exposure to body fluids (such as blood, urine, stool, saliva, semen, vaginal fluids or vomit) of a person with Ebola disease, including the body fluids of a person under investigation in whom diagnosis is pending.
- In the **PAST 8 WEEKS,** you have been notified by a public health authority that you may have been exposed to a person with Ebola disease.

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)

POSSIBLE ADVERSE REACTIONS FROM BLOOD DONATION

Blood donation may have adverse consequences, including fatigue, feeling lightheaded, fainting, bruising (hematoma), decreased exercise tolerance for 3-5 days, and false-positive test results. Rare adverse consequences may include, but are not limited to the needle entering an artery, bleeding after leaving the donation site, nerve irritation, nausea, vomiting, pallor, muscle twitching, temporary loss of bladder control, infection, blood clot formation (thrombosis) and vein inflammation (phlebitis). In unusual circumstances additional outside medical care may be necessary.

ADDITIONAL INFORMATION FOR APHERESIS DONORS

Apheresis is an automated procedure that is used to collect blood products (platelets, plasma, and red blood cells) from your blood. During apheresis, your blood is circulated through a cell separator that collects only the product(s) that are needed and returns the rest of the blood to you. During apheresis collections, a small amount of anticoagulant (citrate) is added to the donor's blood to prevent clotting during the procedure. Donors may also receive normal saline as part of the apheresis collection procedure. Qualified collection staff members closely monitor the entire Apheresis process.

At a maximum, donors may donate platelets or plasma by apheresis no more frequently than every 3 days, up to twice per week or up to 24 times in a 12 month period.

Apheresis donations may have additional adverse consequences, including but not limited to symptoms of low calcium (numbness or tingling around the mouth or in your fingers, cramps, stiffness) for which you may be given oral calcium replacement, feeling of warmth, chills, allergic reactions, shortness of breath, chest pain, decreased blood pressure, or air embolism.

BLOOD DONATION AND IRON DEFICIENCY

Donating blood removes iron from your body. Prior to donating, we test your hemoglobin level. This measures how much hemoglobin protein you have in your red blood cells, however, it does not measure the level of iron in your body. Even if you qualify for blood donation, you may have low iron reserves. Replacing this iron is important for your health. Studies show that simply eating iron-rich foods may not be enough to replace all the iron lost with blood donation in all donors.

Donors at risk for low iron levels are:

- Young donors (16 – 25 years of age)
- Premenopausal females (i.e. females who are of childbearing potential) who are potential donors
- Frequent donors
- Donors near the hemoglobin cut-off level

Many people with low iron levels feel fine and have no symptoms, but low iron levels may cause:

- tiredness and irritability
- reduced endurance during exercise or everyday activities
- difficulty concentrating
- a craving to chew things such as ice or chalk (pica)

We currently recommend that frequent and at risk blood donors take a multivitamin containing iron or an iron supplement to replace the iron lost with each donation. Before starting, however, you should discuss this with your health-care provider.

After you donate, allow yourself adequate time to recover:

- Sit on the edge of the bed and count to ten
- Spend about 15 minutes drinking water and enjoying a snack in the refreshment area
- Let someone know if you feel dizzy, queasy, or otherwise unusual

DONOR ELIGIBILITY

Donors who do not meet donor eligibility criteria will be notified of the basis for the deferral, the period of the deferral, and the donor's record will identify the donor as ineligible to donate.

For further information, please speak with blood center staff.

THANK YOU FOR DONATING BLOOD TODAY!

Blood Bank of Hawaii
(808) 845-9966

Medication Deferral List

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

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		dutasteride	**6 Months**
	Jalyn			
Immunosuppressant	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	cabotegravir	**2 Years**
		Yeztugo	lenacapavir	
Basal cell skin cancer	Erivedge		vismodegib	**2 Years**
	Odozmo		sonidegib	
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)			
Experimental medication				**As defined by the medical director**

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.

PARENTAL CONSENT INFORMATION

Every day, hundreds of lives depend on volunteer blood donors. By giving the gift of life on a regular basis, you help ensure that the blood will be there for Hawaii's patients. The only source for blood is generous volunteers like you!

Common Questions about Blood Donation

Q: Is blood donation safe?
A: Donating blood is safe. All supplies used to collect blood are completely sterile and used only once. You cannot contract HIV or other infectious diseases from donating blood.

Q: Does donating blood hurt?
A: Comfort levels vary from person to person, but most donors say there is nothing to it. You will feel a slight pinch and it is over before you know it.

Q: How long will it take?
A: The entire process takes about 60 minutes, including the interview before and refreshment time after donation. For your safety, you must stay in the refreshment area at least 15 minutes following the donation.

Q: How much can I give?
A: Every donor is evaluated individually with safety in mind. A whole blood donation is about one pint. The exact amount depends on your gender, height and weight.

Blood Donor Qualifications

In general, volunteer blood donors must be 16 or older and in good health.

Whole Blood Height/Weight Restrictions for Donors Age 16-18

Eligibility is based on Estimated Total Blood Volume

Males between 16 and 18: You must be at least 5' tall and weigh at least 110 pounds								
Females between 16 and 18: If you weigh at least 110 pounds but are shorter than 5'6", refer to chart below:								
Females who are:	4'10"	4'11"	5'	5'1"	5'2"	5'3"	5'4"	5'5"
Must weigh at least:	146	142	138	133	129	124	120	115

The Donation Process

Whole Blood Donation

Blood is collected from an arm vein into a bag specially designed to store blood. Typically, each unit is separated into multiple components, usually red blood cells and plasma. Whole blood donation is the most common way to donate blood.

Apheresis Donation

Apheresis is an automated procedure that is used to collect blood products (platelets, plasma, and red blood cells) from your blood. During apheresis, your blood is circulated through a cell separator that collects only the product(s) that are needed and returns the rest of the blood to you. During apheresis collections, a small amount of anticoagulant (citrate) is added to the donor's blood to prevent clotting during the procedure. Donors may also receive normal saline as part of the apheresis collection procedure. Qualified collection staff members closely monitor the entire apheresis process.

Some Potential Side Effects

Donating blood removes iron from the body. Frequent blood donors may become iron deficient despite having an acceptable hemoglobin level. A multivitamin or iron replacement between donations may reduce the risk of iron deficiency. Serious complications are rare. However, as in any medical procedure, there are certain risks. Potential side effects include: nausea, dizziness, lightheadedness, pallor, fainting, bruising, or swelling of the arm from which blood was drawn.

Continued on next page…

Some Potential Side Effects...continued

On rare occasions, more severe reactions with long-term complications may occur, such as infection or nerve damage. Other possible complications include fatigue, decreased exercise tolerance for three to five days and, very rarely, allergic reaction, shortness of breath, chest pain, and decreased blood pressure.

While a small percentage of blood donors have adverse reactions, donors aged 16 to 18 do experience a higher prevalence of reactions.

To reduce the likelihood of a reaction, the blood center evaluates eligibility for younger donors based on weight and height to determine blood volume. The chart on the previous page indicates whether your blood volume is sufficient for you to donate.

Apheresis donations may have additional adverse consequences, including but not limited to symptoms of low calcium (numbness or tingling around the mouth or in your fingers, cramps, stiffness) for which you may be given oral calcium replacement, feeling of warmth, chills, allergic reactions, shortness of breath, chest pain, decreased blood pressure, or air embolism.

Parents/Legal Guardians: Help the donor have a good donation experience.

The day before donation: Maintain a healthy iron level in your diet by eating iron-rich foods, such as red meat, fish, poultry, beans, spinach, iron-enriched cereals and dried fruits like apricots and raisins. Eat healthy and drink plenty of fluids starting two days prior to donation. Get a good night's sleep. Drink 8-10 glasses of fluids. Being well-hydrated helps donors maintain blood volume and can prevent dizziness or fainting.
The day of donation: Make sure the donor has a hearty meal before donating, and encourage the donor to carefully follow our directions.

Safety of both the blood donor and the patient receiving the blood is of the utmost importance. Each blood donation is performed by a trained Blood Bank of Hawaii staff member and includes:

- A mini-physical to ensure blood pressure, temperature, pulse, and hemoglobin count are within established parameters to safely donate blood.
- A confidential interview with our Collections staff to review each donor's medical and travel history, potential exposure to infectious diseases and the opportunity to ask questions and receive counseling regarding the donation process and related testing.
- Collection of the blood which takes just five to eight minutes on average.
- A brief rest on the donor bed and refreshments following donation to help recover and replenish fluids.
- A sample from each blood donation will be tested for HIV (AIDS), HTLV, hepatitis, syphilis, and other infectious agents as required by regulations. Abnormal test results are confidential and unless required by law, will only be reported to the donor.

If you have any questions about the blood donation process, please call the Collections Department of Blood Bank of Hawaii at (808) 845-9966 (Oahu) or 800-372-9966 (Neighbor Islands). On behalf of the patients we serve, we thank you for your support of your teenager's wish to selflessly save lives in Hawaii.