

Blood Donor Educational 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 a Stanford Blood Center (SBC) team member. 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

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

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 AIDS or have ever had a positive HIV test
- Have EVER used needles to take any drugs not prescribed by your doctor
- Are a male who has had sexual contact with another male, IN THE PAST 12 MONTHS

- Have EVER taken money, drugs or other payment for sex
- Have had sexual contact in IN THE PAST 12 MONTHS with anyone described above
- Have had syphilis or gonorrhea IN THE PAST 12 MONTHS
- Have been in juvenile detention, lockup, jail or prison for more than 72 consecutive hours IN THE PAST 12 MONTHS

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 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.

The following symptoms can be present before an HIV test turns positive:

- Fever
- Enlarged lymph glands
- Sore throat
- Rash

DO NOT donate if you have these symptoms!

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.

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).

Thank you for donating blood today!

Stanford Blood Center
650-725-9968

DO NOT DONATE IF YOU have received a transplant of live cells, tissues or organs from animals. Porcine (pig) heart valves, skin grafts, or bone powder (commonly used in dentistry) are not cause for deferral.

Medication Deferral List

SOME MEDICATIONS MAY AFFECT YOUR ELIGIBILITY TO DONATE BLOOD.
PLEASE TELL US IF YOU...

Are being treated with the following types of medications...	or have taken...	also called...	anytime in the last...		
Anti-platelet agents (usually taken to prevent stroke or heart attack)	Feldene	piroxicam	2 days		
	Effient	prasugrel	14 days		
	Brilinta	ticagrelor			
	Plavix	clopidogrel			
	Ticlid	ticlopidine			
	Zontivity	vorapaxar			
Anticoagulants or “blood thinners” (usually to prevent blood clots in the legs and lungs and to prevent strokes)	Xarelto	rivaroxaban	7 days		
	Fragmin	dalteparin			
	Lovenox	enoxaparin			
	Pradaxa	dabigatran			
	Eliquis	apixaban			
	Savaysa	edoxaban			
	Coumadin Warfilone Jantoven	warfarin			
	Heparin, low molecular weight heparin (unless listed separately)	heparin			
Acne treatment	Arixtra	fondaparinux	1 Month		
	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 Odomzo		vismodegib sonidegib	24 months
	Relapsing multiple sclerosis	Aubagio		teriflunomide	24 months
Psoriasis	Soriatane	acitretin	36 months		
	Tegison	etretinate	Ever		
Hepatitis exposure	Hepatitis B Immune Globulin	HBIG	12 months		
Experimental Medication or Unlicensed (Experimental) Vaccine			12 months, or as indicated by SBCMD		
Growth hormone from human pituitary glands*			Ever		
Insulin from Cows (Bovine or Beef Insulin) manufactured in the United Kingdom*			Ever		

* No longer available in US.

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

Medication Deferral List

Some medications affect your eligibility as a blood donor, for the following reasons:

Anti-platelet agents affect platelet function, so people taking these drugs should not donate platelets for the indicated time; however, you may still be able to donate whole blood.

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.

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.

Erivedge (vismodegib), Odomzo (sonidegib), Aubagio (teriflunomide) can cause birth defects or the death of an unborn baby if transfused to a pregnant woman.

Growth hormone from human pituitary glands was prescribed for children with delayed or impaired growth. The hormone was obtained from human pituitary glands, which are in the brain. Some people who took this hormone developed a rare nervous system condition called Creutzfeldt-Jakob disease (CJD, for short).

Insulin from cows (bovine, or beef, insulin) is an injected medicine used to treat diabetes. If this insulin came to the United States from the United Kingdom (where "mad cow disease" has occurred) it could contain material from cattle that have "mad cow disease." Although no cases of the human type of "mad cow disease" have been reported in people treated with bovine (beef) insulin, there is concern that someone exposed to "mad cow disease" through beef insulin could transmit it to someone who receives their blood.

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.

Donors should NOT discontinue medications prescribed or recommended by their physician in order to donate blood.

YOUR DONATION

You will be donating up to approximately one pint of whole blood. If you are donating using automation, the amount collected will be tailored to your height, weight, and blood counts. Please let us know if at any time you do not want to continue.

TESTING YOUR BLOOD

Your blood will be tested for evidence of infections that may be transmissible by blood including, but not limited to, Hepatitis B and C, HIV, HTLV, Syphilis, West Nile Virus, and Zika Virus. Your blood will also be typed for ABO, Rh and possibly other blood cell markers that may be important for transfusion or transplantation. Some of the tests may be investigational (research) tests. We will not notify you if all of your infectious disease tests are negative. To better interpret and understand the results of your tests, it may be necessary to contact you for follow-up testing. There may be circumstances where your blood is not tested. In these cases it will not be used for transfusion.

For additional clarification regarding the FDA-mandated MSM deferral policy, please refer to our website <https://stanfordbloodcenter.org/msm-12-month-deferral>.

YOUR RECORDS

Stanford Blood Center is required to retain records of all your donations, your answers to your questions, your test results and your eligibility to donate. You have a right to request a copy of your records and to ask that we update information about you.

POSSIBLE SIDE EFFECTS OF BLOOD DONATION

The most common side effects of blood donation are bruising at the donation site or light-headedness. Rarely, fainting, inflammation of the vein, skin infection, or nerve injury may occur. We offer a post-donation callback line for you to contact us and discuss your symptoms. If further medical treatment is indicated, we may advise you to notify your primary care physician and/or seek medical attention at your local urgent care clinic or emergency department depending on the symptoms experienced. Stanford Blood Center does not assume financial responsibility for medical care to treat symptoms that arise after blood donation.

RESEARCH ACTIVITIES

In addition to making transfusable components, we support research both within and outside of Stanford University by providing researchers with de-identified samples and components (for example, extra blood tubes or white blood cells that are not needed for transfusion). We also occasionally collect blood solely for research, and we may contact you to ask if you are interested in donating for this purpose. Researchers at Stanford Blood Center analyze donor information and perform investigational tests to try to identify ways to improve the safety and efficacy of blood transfusion and transplantation. We will not release your identity or contact information to any researchers outside of Stanford Blood Center. We may contact you if a researcher notifies us of a finding that is important to your health. Donated blood is used by Stanford Blood Center for any use it deems advisable, and any rights or ownership with respect to the donated blood is relinquished by the donor. Even though blood is freely given by volunteers, there are significant costs to recruit blood donors and then to collect, test, process, store and deliver blood to hospitals. These and other operating and overhead costs of the Blood Center are supported by processing fees collected from hospitals, researchers and other customers.

EMERGING INFECTIOUS DISEASES

Please do not donate if you have **EVER** had **Ebola virus** infection or disease.

Please do not donate for **4 weeks** after full recovery, if you have been diagnosed with an infection of **chikungunya** or **dengue**.

If you have been diagnosed with one of the above infections within the timeframe specified, please notify our staff onsite or call our post-donation callback line at 650-725-9968.

DONOR COMMUNICATION

From time to time, we may utilize various communication tools to connect with our donors, including (but not limited to) postal mail, email, SMS (text) and push notifications. If you wish to change your opt-in preferences, you may do so by using available application settings or by contacting us at sbcsupport@stanford@stanford.edu or 888-723-7831.

vCJD countries of risk - United Kingdom

Channel Islands
England
Falkland Islands
Gibraltar
Isle of Man
Northern Ireland
Scotland
Wales

vCJD countries of risk -Europe

Albania
Austria
Belgium
Bosnia-Herzegovina
Bulgaria
Croatia
Czech Republic
Denmark
Finland
France, including its overseas departments (e.g., Martinique and others)
Germany
Greece
Hungary
Republic of Ireland
Italy
Kosovo
Liechtenstein
Luxembourg
Macedonia
Montenegro
Netherlands
Norway
Poland
Portugal, including the Azores
Romania
Serbia
Slovak Republic
Slovenia
Spain, including the Canary Islands and Spanish North African territories
Sweden
Switzerland
Yugoslavia (or the former Federal Republic of Yugoslavia)