

Joint Program in Transfusion Medicine  
Brigham and Women's Hospital / Dana Farber Cancer Institute  
Boston, MA 02115

# Kraft Family Blood Donor Center



**Dana-Farber**  
Cancer Institute



**Brigham and Women's Hospital**  
Founding Member, Mass General Brigham

## Offsite FastTrak Donor Education Material

Form # 20-09

### ***READ THIS BEFORE YOU DONATE!***

We know that you would not donate unless you think your blood is safe. 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 if you have a risk factor. If you do not understand a question, skip over it and it will be addressed during the health review process with staff when you arrive to donate. ***All information you provide is confidential.***

### **To determine if you are eligible to donate we will:**

- Ask about your health and travel
- Ask about medications you are taking or have taken
- 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

### **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

**We NEVER reuse a needle or tubing set**

### **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 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/AIDS risk behaviors**

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.**

**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 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.

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

**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 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).

**THANK YOU FOR DONATING TODAY!**

**MEDICATION DEFERRAL LIST**

**PLEASE TELL US IF YOU are being treated with any of the following medications within the times frames specified below:**

**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	isotretinoin	1 Month	
	Amnesteem			
Multiple myeloma	Absorica	thalidomide lenalidomide		
	Sotret			
Rheumatoid arthritis	Rinvoq	upadacitinib		
Hair loss remedy	Propecia	finasteride		
Prostate symptoms	Proscar	finasteride		
	Avodart Jalyn	dutasteride	6 Months	
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
Basal cell skin cancer	Erivedge Odomzo	vismodegib sonidegib	2 Years	
Relapsing multiple sclerosis	Aubagio	teriflunomide		
Rheumatoid arthritis	Arava	leflunomide	3 Years	
Psoriasis	Soriatane	acitretin		
	Tegison	etretinate		
HIV treatment	Any medication to treat HIV. May also be called antiretroviral therapy (ART)		Ever	
Experimental medication			As defined by the medical director	

**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:***

**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 or red 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; however, you may still be able to donate whole blood or red 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 which 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 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. An exception to this is the Covid 19 vaccine study trials- if you are participating in one of these vaccine trials, contact the donor center to learn if you are eligible to donate blood products.

## Blood Component Donor Consent

### Allogeneic Donors:

I give my consent to be a blood donor. The medical history I have provided is true to the best of my knowledge. I am at least 17 years old. I have read (or have had read to me) and understand “What You Should Know Before Giving Blood” as well as any additional information sheets provided to me today. I have had the opportunity to ask questions about the information provided. If I consider myself to be at risk for spreading viral hepatitis or the virus known to cause AIDS (HIV), I agree not to donate for transfusion to another person. I grant permission for my blood to be tested for HIV, hepatitis, syphilis, other infectious diseases, and other conditions, such as hemoglobin S (sickle trait). I understand that if a test result is positive or unclear that my blood will not be used, I will be notified, and my name will be placed on a list of deferred donors. I understand that lab results will be kept confidential, but may need to be reported to government agencies, including state or local health departments. I understand that there may be circumstances in which infectious disease testing is not performed. I recognize that potential complications from donating blood and blood products include nausea, lightheadedness, dizziness or fainting, as well as pain, bruising, bleeding or infection at the site where the needle is inserted. Repeated whole blood donations can lead to iron deficiency and anemia. I voluntarily furnish my blood product to the Blood Bank to use as needed for patient care, quality programs, and/or research. I may ask questions regarding the donation procedure at any time and am free to discontinue at any time.

### Healthy Iron Levels & Donations

As a blood donor, you may wonder whether your body’s iron levels are impacted by donating blood and what role iron plays in your health. Iron is a mineral that is found naturally in the human body, many foods, and in multivitamin/iron supplements. Iron helps to create new red blood cells (RBCs) in the body. Most of the iron is found in our hemoglobin which is part of our RBCs. All donors lose iron from their blood donations and sometimes can drop below what is considered normal (the normal range can vary by sex and age). We test your hemoglobin before your donation to make sure you have enough RBCs before donating to help a patient in need! Even though iron is found in hemoglobin, testing your hemoglobin level is not the same as testing your body’s iron levels. For women, the minimum level is 12.5 g/dL and for men it is 13.0 g/dL. We will inform you if your hemoglobin is too low to donate. **For any concerns regarding your iron level, please have a talk with your healthcare provider who will order a blood test for ferritin that will show your iron level. Always talk to your provider before starting any new iron supplement.**

### Additional Information for Platelet Donors:

All precautions are taken to avoid complications, but there is a small chance that bacterial contamination of my blood may occur. There is a possibility that, due to technical failure, I might not get my blood back. Other risks associated with this procedure are related to the infusion of ACD, and I may feel tingling around my mouth or slight twitching of my muscles. I might experience chills. I understand I can donate platelets up to 24 times in a 365 day period.

## **Additional Information for Autologous and Therapeutic Donors:**

I understand that my blood product may be discarded.

### **Understanding HLA Testing and Transfusion Related Lung Injury (TRALI)**

#### **Do I need to be tested for antibodies to HLA antigens?**

Regulations now require that platelets and plasma from female donors who have had a pregnancy resulting in a live birth be tested and have results interpreted as negative for HLA antibodies. This will affect many of our female donors, some of whom will not be allowed to donate platelets or plasma if their test results are positive for HLA antibodies. If you are positive, you can continue to donate whole blood.

#### **What is TRALI?**

TRALI is an uncommon reaction in patients after blood transfusion, but it is a leading cause of death due to transfusion. Currently, most cases are caused by specific antibodies, called anti-HLA antibodies, which female donors can make naturally after a pregnancy resulting in a live birth.

#### **Why are HLA antibodies created during a pregnancy resulting in a live birth?**

The HLA (human leukocyte antigen) system is the genetic fingerprint of your immune system. Nearly everyone's HLA type is different from one another. So not surprisingly, a father's HLA type is almost never the same as the mother's. During a pregnancy resulting in a live birth, mothers are often exposed to HLA antigens from the father (that are in the baby) through small, insignificant bleeds from the placenta. The mother's immune system can see these HLA antigens as foreign because she does not have them, and thus, makes antibodies to those antigens. These antibodies are of no consequence to the mother's health, but they end up in the platelet and plasma products that are transfused to patients. It is believed that these antibodies play a role in causing TRALI in certain patients.

#### **What can I do if I test positive for HLA antibodies?**

While you are no longer eligible to donate platelets or plasma, you can still donate whole blood and we ask that you consider scheduling an appointment to donate whole blood. You are still a valued member of the Kraft Family Blood Donor Center and we ask that you continue to be involved by continuing to donate or volunteer with us!

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## Managing your Calcium as a Platelet Donor

### Importance of Calcium:

Calcium is a nutrient that all humans need and is the most abundant mineral in the body. 99% of calcium is stored in your bones, and the remaining 1% is stored in blood, muscle, and other tissues. For our body to perform daily functions, the body works in maintaining a steady amount of calcium in the blood and tissues. This mineral is found naturally in many foods and food manufacturers add it to certain products. In addition, some may also get calcium from supplements. Alongside calcium, people need vitamin D as it helps the body absorb calcium. Vitamin D is found from fish oil, fortified dairy products, exposure to sunlight, and supplements/multivitamins.

**Before starting any calcium or vitamin D supplement, it is important you check first with your medical provider.**

### How much calcium do I need per day?

- **9–18 years:** 1,300 mg
- **19–50 years:** 1,000 mg
- **51–70 years:** 1,000 mg for males and 1,200 mg for females
- **71 years and above:** 1,200 mg

### Calcium Rich Foods:

Yogurt	Milk	Fortified dairy alternatives	Sardines	Salmon	Cheese
Tofu	Green leafy vegetables	Fortified breakfast cereals	Nuts and seeds	Legumes and grains	Cornmeal and corn tortillas

**Calcium Depleting Foods/Supplements:** Caffeine, cigarettes, alcohol, and soda

Avoid taking calcium supplements at the same time as iron or multivitamins.

### Platelet Donations:

During platelet donations, donors are given a citrated anticoagulant. The citrate binds to the calcium which prevents clotting of the blood in the apheresis kit. At times, during the shift of the ionized calcium, donors may experience symptoms of hypocalcemia (low calcium). Some symptoms include numbness around your mouth or in your limbs, nausea, light-headedness, muscle spasms/cramps, chills/shivers, tachycardia, chest pain, or nausea. Oral calcium carbonate (TUMS) will be given to a donor if they present any symptoms of hypocalcemia. ***As a prevention, it is recommended platelet donors increase their consumption of calcium rich foods starting three***

***days before their donation.*** Donors should have a healthy meal and plenty of fluids 2-3 hours before their scheduled donation.

# FastTrak