

**Congratulations!** Your son or daughter would like to become a blood donor. With just one donation, they will directly impact the lives of three local hospital patients. Developing life-long habits of blood donation and volunteerism are an integral part of the health and wellbeing of the community. Thank you for your support in our mission of saving lives!

Before you sign this permission form, we want you to feel confident in your son or daughter's decision to become a blood donor. Below we've provided information regarding the blood donation process, why it's important and benefits of becoming a blood donor.

### **WHO CAN DONATE BLOOD:**

Donors must be 16 years or older, in general good health and weigh at least 120 lbs.

### **HOW TO PREPARE FOR A POSITIVE DONATION EXPERIENCE:**

*We want your son or daughter to feel great after they've donated to help others, so encourage them to:*

1. Drink plenty of fluids the night before and leading up to their donation – hydration is key to a positive experience.
2. Eat a good meal – they should not donate on an empty stomach.
3. Incorporate a bit more salt in their meals and snacks on the day of their donation.
4. Get plenty of rest prior to their donation.

### **WHAT TO EXPECT DURING THE DONATION PROCESS:**

*There are four basic steps involved in blood donation, which together take between 30-45 minutes.*

1. **Registration:** A LifeServe team member will take your child's information, review the signed Parental/Guardian permission form for your signature, and check their identification.
2. **History screening:** Your child will complete a series of health and lifestyle questions and receive a mini-physical where they will check temperature, blood pressure, heart rate and their hemoglobin level by pricking their finger to ensure they are healthy to donate.
3. **Donation:** Collecting a unit of blood – about 1 pint – takes approximately 5-10 minutes. They may feel a slight pinch for a few seconds, but that's it!
4. **Snacks:** After the donation, your son or daughter will rest in the snack area where they will enjoy refreshments.

### **THE IMPORTANCE OF HIGH SCHOOL BLOOD DRIVES TO THE LOCAL BLOOD SUPPLY:**

High school blood drives are critical to recruit new, first-time donors and set the stage for life-long habits of blood donation and volunteerism. One in seven people entering a hospital need blood, while only 5 percent of the eligible population chooses to donate. Your son or daughter's choice to become a lifesaving link between blood products and the patient in need is vital to the community.

### **SCHOLARSHIP & RECOGNITION PROGRAMS:**

*Whether your child is organizing their school's blood drive or choosing to donate at the blood drive, we have a program to recognize their commitment to saving lives.*

- **Scholarships:** We offer nearly \$20,000 scholarship opportunities to high school students who host successful blood drives throughout the year.
- **Recognition:** High school students who donate 5 units of blood before graduation earn the honor of becoming a Donor of Distinction and receive a special honors cord to wear at graduation; a Certificate of Achievement; a formal letter of accomplishment from LifeServe Blood Center's president; and recognition in a press release sent to the local newspaper.

### **SAFETY OF DONATING BLOOD:**

Donating blood is a safe process. All materials used in the donation process, including bags and needles, are new, sterile, used only once, and then discarded. Specially trained LifeServe team members will assist your child through the entire donation process.



# PARENTAL/GUARDIAN PERMISSION FORM

LifeServe Blood Center, your community blood center, is pleased that your child is planning to donate blood (whole blood, double red cells, plasma or platelets). To be able to give blood, your child (age 16 or 17) must have your written permission. Please sign the form below to provide consent for their blood donation.

LifeServe Blood Center focuses heavily on the safety and quality of the community blood supply. To determine donor eligibility, we will ask questions about: overall health and medications; travel; participation in activities that may be at risk for Hepatitis or AIDS; behaviors or symptoms associated with infectious diseases; and sexual contact. To ensure safety of the blood supply, it's important these questions are completed in a truthful manner. The donation process is a safe procedure and all materials used in the procedure are new, sterile and designed for one use only. Following every donation, blood is tested for a variety of infections that can be transmitted by transfusion. These include HIV (the AIDS virus), hepatitis, syphilis and several other tests. A total of 14 different tests are performed on each unit of donated blood. Testing does not indicate the presence of alcohol, marijuana, steroids or other drugs in the blood.

Prior to the donation, please do your best to have your child follow the pre-donation tips detailed on the opposite page. It's common for blood donors, especially first-time blood donors, to feel dizzy, light-headed or nauseous while donating blood. There may be slight pain, numbness, tingling, bruising or a red mark where the needle was inserted. Less common risks include fainting, muscle spasms or nerve damage.

**Every donor, including your child, is required to sign a Donor Consent form prior to the donation procedure.**

**Below is the wording used on the Donor Consent form:**

*I have read and understand LifeServe Blood Center's pre-donation information as it applies to the type of donation (platelets, plasma, or red cells) I am about to make. To my knowledge I have answered all questions truthfully and accurately. I understand the information about the spread of the AIDS virus by blood and blood products. I agree not to donate blood or blood products for transfusion to another person or for further manufacture if I think I am at risk for spreading the AIDS virus. I voluntarily donate my blood to LifeServe Blood Center to use in any way it deems advisable. For that purpose I consent to related tests, examinations, and procedures determined appropriate by LifeServe Blood Center. I understand that my blood will be screened for HIV (AIDS virus) and other disease markers to reduce the risk of transmission of infectious disease to the recipient. If this testing is positive and shows that I should no longer donate blood or blood products because of an abnormality or risk of transmitting disease, I understand and agree that LifeServe Blood Center may tell me that by mail and put my name on a list of permanently deferred donors. If required by law, certain governmental health agencies may be notified. If test results determine this blood donation must be discarded, I will be notified by mail. These results may or may not affect my future status as a donor. There may be unforeseen circumstances when infectious disease testing may not be performed and the blood will not be used for transfusion. I understand that trained personnel will insert a needle into my arm to collect blood. The donation of blood is not completely risk free. I have read and understand these risks as presented in the pre-donation information. I have been given opportunity to ask questions and all the questions I have asked have been answered to my satisfaction.*

## **PARENTAL/GUARDIAN CONSENT FOR MINOR DONOR:**

My (son) (daughter) (ward) \_\_\_\_\_, date of birth \_\_\_\_/\_\_\_\_/\_\_\_\_, last four digits of social security number \_\_\_\_\_ a minor, has my consent and permission to make a donation of blood through LifeServe Blood Center, and for that purpose may sign the required consents and submit to the tests, examinations, procedures, reporting and notifications deemed necessary or appropriate in connection with blood donation. I have read the donor educational information and the donor consent and understand that donors are tested for the antibody to HIV (the AIDS virus) and a test for HIV nuclear material. All positive test results will be communicated in written form to BOTH the minor and their guardian/parent. This consent shall be effective for this donation and all subsequent donations made by my (son) (daughter) (ward) until they are 18 years of age or until I withdraw my consent by sending a written notice to LifeServe Blood Center, Attn: Director of Donor Services, 431 East Locust, Des Moines, Iowa 50309.

PRINT PARENT/GUARDIAN NAME: \_\_\_\_\_ RELATIONSHIP: \_\_\_\_\_

PARENT/GUARDIAN ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

PHONE: (     ) \_\_\_\_\_ - \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_ **DATE:** \_\_\_\_\_