What to Expect During Your Donation

Giving blood is safe and simple and the benefit is profound - you will save lives. All across the globe and right in your neighborhood, someone needs blood to fight a disease or illness, accident or injury. With your blood donation today, you will help a family during their critical time of need.

**Donation Process:**

**Donor History Screening**
We want to make sure you are healthy prior to your donation. During this step in the process you will:

- Receive a mini-physical
- Answer health and lifestyle questions
- Have your hemoglobin checked with a finger prick

**Donation**
During your donation, our professional LifeServe Blood Center team members will take great care of you! Sit back and relax as one of our team members collect your donation – one pint takes about five to 10 minutes. You may feel a slight pinch, but that’s it!

**Snacks**
After your donation, you will receive post-donation instructions and be directed to the snack area where you will rest and enjoy refreshments knowing you made a huge difference with your generous donation!

There is no substitute for your donation, so each and every time you give you make a difference. You save lives!

**Important Information:**

**Pre-donation:**
- Drinking plenty of fluids, eating a good meal, increasing your salt intake slightly, and receiving plenty of rest prior to your donation are important factors to a positive donation experience.

**Donation:**
- It is crucial that the health and lifestyle questions asked during the Donor History Screening process are answered with honesty. These questions are mandated by the Food & Drug Administration (FDA) to ensure a safe blood supply. All answers are confidential and used only to determine donor eligibility.
- If you feel uncomfortable or believe your blood may not be eligible for donation during any step of the donation process, simply tell a LifeServe Blood Center team member and we will discontinue the donation process.
- During the donation process, the vast majority of donors feel fine. However, some donors may experience dizziness, light-headedness or nausea. There may be slight pain, numbness, tingling, bruising or a red mark where the needle was inserted.

**Post-donation:**
- Avoid vigorous exercise after your donation.
- Do not smoke within one hour of your donation.
- Do your best to drink four extra glasses of water over the next couple of days to rehydrate.
- Apply firm pressure if the needle site starts to bleed.
- Contact LifeServe Blood Center if you have specific care questions at 800-287-4903, ext. 4876.

Thank you for being a blood donor!
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!
Your Iron Levels & Blood Donation

As a generous blood donor, your health and safety are our main priority. Whether this is your first-time donating or you have been donating for years, it is important to know how your hemoglobin level, which is an iron/protein molecule in your red blood cells, may be affected by donating blood and steps to follow to ensure you feel your best.

What is Hemoglobin and why is it important?
Hemoglobin is an iron/protein molecule in red blood cells that allows our red blood cells to carry oxygen to cells, tissues and organs. During the donation process, we measure your hemoglobin level with a finger prick to ensure your iron levels are high enough to donate safely. Each time you make any blood donation (including platelet apheresis, plasma apheresis, whole blood and double red cells), you lose some iron with your donation. If you lose iron faster than you can replace it through your diet you may become anemic. Many donors have adequate iron levels to donate blood safely, but frequent blood donors should be aware that blood donation may lead to low iron levels or anemia.

What are other causes of low iron levels?
In addition to frequent blood donation, low iron stores can result from:
• Menstruation and pregnancy
• Diets with low iron intake
• Decreased iron absorption from certain medications
• Disease of the digestive tract
• Other types of blood loss (e.g., stomach ulcers, polyps)

What are the causes of anemia?
Other causes of anemia not related to low iron stores include:
• Chronic disease (such as diabetes, severe arthritis or kidney disease),
• Immune destruction of red blood cells
• Acute blood loss
• Vitamin deficiencies

For more information:
800.287.4903
lifeservebloodcenter.org

Caring for you, sharing for life.
If I have a low hemoglobin level...

What are the symptoms?
Often, people with low hemoglobin levels have no symptoms. Those suffering from abnormally low levels, known as anemia, may notice:

- Fatigue
- Pale Skin
- Chest Pain
- Dizziness
- Shortness of Breath
- Headaches
- Cold Hands and Feet

How can I increase my iron level?
To increase your iron, we encourage you to:

1. Consume iron rich foods, which include:
   - Red meat (especially liver) and tofu
   - Fish and shellfish (especially clam, oyster, and shrimp)
   - Spinach or other dark leafy vegetables
   - Peas, lentils, chickpeas and soybeans
   - White, red, or baked beans
   - Iron-fortified cereals and breads

2. Consume adequate amounts of vitamin C to aid with iron absorption.

3. Speak with your doctor or dietician about vitamin supplements containing iron.

Do I need to see a physician?
LifeServe Blood Center cannot determine the cause of your low hemoglobin level. If you find at the time of your donation that you do have a low hemoglobin level and you are not a frequent blood donor, then you may wish to have your hemoglobin level rechecked.

If you donate three or more times a year and do not have other causes of anemia or low iron levels, then your low hemoglobin could be related to blood donation. Simply increasing the amount of high iron foods in your routine diet or taking iron supplements should restore your iron levels to normal during the next several months.

Can I continue to donate blood?
Absolutely! Approximately 10 percent of potential donors are not able to donate blood at one time or another, due to low hemoglobin level. If your hemoglobin is low, we encourage you to follow the steps above to increase your level prior to your next donation. If you received an abnormally low level and/or are symptomatic, please speak with your primary physician before you attempt to donate again.

For more information:
800.287.4903
lifeservebloodcenter.org

Caring for you, sharing for life.
Reference Guide

Quick Tips for Completing the Donor Questionnaire

Prior to the donation, you will be asked a series of health and lifestyle questions. To assist you in answering these questions accurately, we’ve provided a quick reference guide for the travel and medication history questions.

Travel History

During the donor questionnaire, you will be asked about your travel and residency in certain countries. Please review the countries below carefully. If you were born in, have lived in or visited these countries, you may not be eligible to donate.

Countries in the United Kingdom

(reference for questions 28 and 31)

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

European Countries

(reference for question 30)

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

IMPORTANT

- Please read each question carefully before selecting the answer.
- Be sure to reference the medication and country list on this guide.
- If there are questions you do not understand, please leave them blank.

Questions completing the questionnaire?

A LifeServe Blood Center staff member will be happy to assist you.

Thank you for being a blood donor!
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 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; however, 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.

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 bovine (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.
## 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 ...
- which is also called ...
- anytime in the last ...

### Anti-platelet agents

(usually taken to prevent stroke or heart attack)

<table>
<thead>
<tr>
<th>Medication</th>
<th>Anti-platelets</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feldene</td>
<td>Piroxicam</td>
<td>2 days</td>
</tr>
<tr>
<td>Effient</td>
<td>Prasugrel</td>
<td>7 days</td>
</tr>
<tr>
<td>Brilinta</td>
<td>Ticagrelor</td>
<td>14 days</td>
</tr>
<tr>
<td>Plavix</td>
<td>Clopidogrel</td>
<td></td>
</tr>
<tr>
<td>Ticlid</td>
<td>Ticlopidine</td>
<td></td>
</tr>
<tr>
<td>Zontivity</td>
<td>Vorapaxar</td>
<td></td>
</tr>
<tr>
<td>Xarelto</td>
<td>Rivaroxaban</td>
<td>2 days</td>
</tr>
<tr>
<td>Fragmin</td>
<td>Dalteparin</td>
<td></td>
</tr>
<tr>
<td>Lovenox</td>
<td>Enoxaparin</td>
<td></td>
</tr>
<tr>
<td>Pradaxa</td>
<td>Dabigatran</td>
<td></td>
</tr>
<tr>
<td>Eliquis</td>
<td>Apixaban</td>
<td></td>
</tr>
<tr>
<td>Savaysa</td>
<td>Edoxaban</td>
<td></td>
</tr>
<tr>
<td>Coumadin</td>
<td>Warfarin</td>
<td>7 days</td>
</tr>
<tr>
<td>Warfilone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jantoven</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heparin, low molecular weight heparin (unless listed separately)</td>
<td>Heparin</td>
<td>7 days</td>
</tr>
<tr>
<td>Arixtra</td>
<td>Fondaparinux</td>
<td></td>
</tr>
</tbody>
</table>

### Anticoagulants or “blood thinners”

(usually to prevent blood clots in the legs and lungs and to prevent strokes)

<table>
<thead>
<tr>
<th>Medication</th>
<th>Anticoagulants</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Accutane</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Amnesteem</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Absorica</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Claravis</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Myorisan</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sotret</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Zenatane</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coumadin</td>
<td>Warfarin</td>
<td>7 days</td>
</tr>
<tr>
<td>Warfilone</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jantoven</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Heparin, low molecular weight heparin (unless listed separately)</td>
<td>Heparin</td>
<td>7 days</td>
</tr>
<tr>
<td>Arixtra</td>
<td>Fondaparinux</td>
<td></td>
</tr>
</tbody>
</table>

### Acne treatment

<table>
<thead>
<tr>
<th>Medication</th>
<th>Acne treatment</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Propecia</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proscar</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Avodart</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jalyn</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Isotretinoin</td>
<td></td>
<td>1 month</td>
</tr>
</tbody>
</table>

### Hair loss remedy

<table>
<thead>
<tr>
<th>Medication</th>
<th>Hair loss remedy</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Propecia</td>
<td>Finasteride</td>
<td></td>
</tr>
<tr>
<td>Proscar</td>
<td>Finasteride</td>
<td></td>
</tr>
<tr>
<td>Avodart</td>
<td>Dutasteride</td>
<td>6 months</td>
</tr>
<tr>
<td>Jalyn</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Prostate symptoms

<table>
<thead>
<tr>
<th>Medication</th>
<th>Prostate symptoms</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avodart</td>
<td>Dutasteride</td>
<td>6 months</td>
</tr>
<tr>
<td>Jalyn</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Basal cell skin cancer

<table>
<thead>
<tr>
<th>Medication</th>
<th>Basal cell skin cancer</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Erivedge</td>
<td>Vismodegib</td>
<td>2 years</td>
</tr>
<tr>
<td>Odomzo</td>
<td>Sonidegib</td>
<td></td>
</tr>
<tr>
<td>Aubagio</td>
<td>Teriflunomide</td>
<td>2 years</td>
</tr>
</tbody>
</table>

### Relapsing multiple sclerosis

<table>
<thead>
<tr>
<th>Medication</th>
<th>Relapsing multiple sclerosis</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Soriatane</td>
<td>Acitretin</td>
<td>3 years</td>
</tr>
<tr>
<td>Tegison</td>
<td>Etretinate</td>
<td>Ever</td>
</tr>
</tbody>
</table>

### Psoriasis

<table>
<thead>
<tr>
<th>Medication</th>
<th>Psoriasis</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acitretin</td>
<td>Etretinate</td>
<td>Ever</td>
</tr>
</tbody>
</table>

### Hepatitis exposure

<table>
<thead>
<tr>
<th>Medication</th>
<th>Hepatitis exposure</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hepatitis B Immune Globulin</td>
<td>HBIG</td>
<td>12 months</td>
</tr>
</tbody>
</table>

### Growth hormone from human pituitary glands

<table>
<thead>
<tr>
<th>Medication</th>
<th>Growth hormone from human pituitary glands</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Insulin from Cows (bovine or beef insulin) manufactured in the United Kingdom</td>
<td>Ever</td>
<td></td>
</tr>
</tbody>
</table>

* No longer available in US

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

**SOME CIRCUMSTANCES MAY AFFECT YOUR ABILITY TO DONATE CERTAIN DONATION TYPES. PLEASE TELL US IF YOU ...**

<table>
<thead>
<tr>
<th>Anytime in the last...</th>
<th>Have had...</th>
</tr>
</thead>
</table>
| **Today**              | • Routine dental cleaning  
                        | • Severe acute disease of any form (a current disease of sudden onset that disrupts most of the person’s normal activities) |
| **7 days**             | • Minor dental procedure such as tooth extraction, root canal, filling, or similar treatment  
                        | • Minor surgery that did not require more than local anesthesia |
| **14 days**            | • Fever  
                        | • Flu-like Illness |
| **4 months**           | • Endoscopic procedure  
                        | • Major dental procedure that required more than local anesthesia  
                        | • Major surgery that required more than local anesthesia |
| **6 months**           | • Toxoplasmosis |
| **12 months**          | • Catheter  
                        | • Sexual contact with someone who has taken clotting factor concentrates  
                        | • Females Only: sexual contact with a man who has had sexual contact, even once, with another male |
| **2 years**            | • Brucellosis  
                        | • Osteomyelitis  
                        | • Q Fever  
                        | • Tuberculosis  
                        | • Rheumatic Fever |
| **3 years**            | • Convulsions  
                        | • Seizures  
                        | • Taken anticonvulsant medication  
                        | • Syncope |
| **Ever**               | • Cornea transplant  
                        | • Animal tissue transplant  
                        | • Used clotting factor concentrates more than once  
                        | • Positive test for HTLV I/II  
                        | • Males Only: sexual contact with another male, even once  
                        | • Chronic (lasting three or more months) or relapsing (a disease that returns after the signs and symptoms had disappeared) disease of any form:  
                          |   o Renal Disease  
                          |   o Liver Disease  
                          |   o Central Nervous System Disease  
                          |   o Immunological Disease  
                          |   o Gastrointestinal Disease  
                          |   o Genitourinary Disease  
                          |   o Respiratory Disease  
                          |   o Metabolic Disease |
Platelets, Plasma, Red Cells Donation

IF YOU WILL BE DONATING DOUBLE RED CELLS, PLATELETS OR PLASMA TODAY PLEASE READ THIS.

APHERESIS DONORS MUST READ THIS PRE-DONATION INFORMATION BEFORE SIGNING THE INFORMED CONSENT FOR BLOOD DONATION

I volunteer to the process of apheresis for the collection of Platelets/Plasma/Red Cells from my blood.

I understand that if I have donated whole blood or a single unit of red blood cells in the past eight weeks, two units of red blood cells in the past 16 weeks, or platelets in the past seven days, or plasma in the past 4 weeks, that I am not eligible to donate at this time. I can donate sooner if the apheresis machine I donated on has a red cell volume less than 100 mls.

I understand that my blood will be drawn by a needle from a large vein in one arm into a cell separator where a specific blood component will be removed by centrifugation. The specific components not removed by centrifugation will then be returned to me through a needle in the same arm. During the procedure, a sterile chemical anticoagulant is automatically added to my blood. I understand the anticoagulant used contains citrate. The anticoagulant is rapidly eliminated from my body. I understand this solution may cause numbness or a tingling sensation in my lips or fingertips and that if this occurs I am to notify the apheresis nurse or technician. The procedure may take from 30 minutes to two hours depending on the products collected. Any blood donation involves some loss of blood cells.

I understand that there are limitations to the number and types of components that can be donated per year such as, a donation of platelets 24 times in a rolling 12 month period or a donation of double red cells 3 times in a calendar year, or a donation of plasma once in 28 days. I understand that I should only participate in one plasmapheresis program at a time for my safety.

I have been advised of certain other procedural risks such as an unusual taste in my mouth, hyperventilation, itching, hives, abdominal cramps, nausea, vomiting, light-headedness, fainting, difficulty breathing, pallor, feeling of warmth, chills, excessive tiredness, seizures, cardiac arrhythmia, muscle spasms or cramping, complications at the needle site (such as bruising, swelling or pain), blood loss resulting from procedure termination and deferral from donation, infection, and air embolus, chest pain, or bronchospasm, which may be life-threatening. Possible long-term effects of apheresis may include a reduction in red blood cells and iron due to red blood cell loss, reduction in platelet activity with platelet donations, and a reduction in plasma proteins (including antibodies) with plasma donations.

I have read and understand the procedure and risks and am voluntarily consenting to apheresis. All questions and concerns which I may have about this procedure have been answered in a satisfactory manner by either the apheresis staff or the Medical Director. I authorize LifeServe’s physicians, and the physicians’ assistants, or designees to perform such therapies or procedures as may become necessary as a result of, or subsequent to, this procedure. I realize I may withdraw from the apheresis program at any time. I understand a copy of this consent will be given to me at my request.