Thank you for attending this donor session.

Welcome

Please read the whole of this document carefully if this is your first blood donation, you are returning after a break or commencing platelet donation.

Regular Donors are asked to read the Possible Consequences of Giving Blood or Platelets (pages 6 to 8) and Blood Safety Information (pages 10 and 11).

At our donation sessions we will provide a safe and pleasant experience with a commitment to use your time efficiently.

Whole Blood donors only – When you book an appointment, we will aim to ensure that your donation journey lasts no more than one hour from your planned arrival time.

If you do not book an appointment, we will try our best to see you and then commit to provide you with an expected time for your total donation experience.

If you have any questions about donating, please ask a member of staff.

If you do not wish to donate today, you may leave at any time. It helps if you tell us you are going, but you do not have to tell us why.
THE DONATION PROCESS
If you are between 17 and 65 years old (if it is your first time) and weigh between 50kg and 160kg you may be able to donate blood today.

For your safety, we advise all donors to drink plenty of fluids in the 24 hours before donating and to have eaten your normal meals.

REGISTRATION
When you volunteer to give blood or platelets we need to record your details (full name, address and date of birth) on our database. If you have spoken to our National Call centre or registered by another route such as our website or by filling in a registration form we may already hold your details, so you will be asked to confirm them.

We will provide 500ml of fluid just before you donate. By drinking this over about five minutes, it will help with your wellbeing during and after donation.

HEALTH SCREENING
Each time you donate, you are asked to fill in a ‘Health Check Questionnaire’ which asks about your medical, lifestyle and travel history. You will then have a health screening interview. This is to be sure you are well enough to donate and it is safe to give your blood to a patient. We will conduct the interview in private to help you to answer fully and honestly. If you are not able to donate today, we will explain the reasons. If appropriate, we will tell you when you may return and give you another appointment date. We may ask for permission to contact your doctor for further information, if required.

CONSENT
Next you will need to carefully read and sign the ‘Donor Consent’. This is a legal document that confirms you understand what is involved in blood donation before you donate.

Platelet donors will receive additional information specific to platelet donation and your GP details will be noted. The pulse in your wrist will be checked and recorded.
HAEMOGLOBIN TESTING
We take a small sample of your blood, to check your haemoglobin level. If all is okay, you may be able to donate straight away. If your haemoglobin is lower than our accepted level (125g/l for women, 135g/l for men), we will tell you when you can re-attend or if necessary, advise you to visit your GP.

DONATION
You will be invited to sit on a donation chair where a blood pressure cuff will be placed on your arm to maintain a small amount of pressure during your donation. The cuff is not used to measure blood pressure. Your arm will be thoroughly examined to find a suitable vein before being cleaned with an antiseptic sponge containing Chlorhexidine solution.

Blood donation We will then insert a needle attached to a blood bag into the vein. Donors are advised to do applied muscle tension exercises during donation. This is to promote your wellbeing during and after donation. Following needle insertion you should be comfortable during your donation. If you experience any discomfort or pain please alert a member of staff. Our staff will keep a close eye on you and the bag to make sure everything is fine. It usually takes five to fifteen minutes to complete your donation of 470mls (just under a pint).

Platelet donation We will insert a needle attached to the sterile tubing set within the platelet machine into the vein. Our staff will keep a close eye on you during your donation. If this is your first platelet donation cold drinks only will be offered. During subsequent donations we will offer warm drinks and light snacks.

If there are any problems we may stop the donation early. After donation we will carefully remove the needle from your arm and apply a dressing. We will show you how to press on the site where the needle was. This is important to help stop bleeding and prevent bruising.

RESTING
We will slowly raise the donation chair into the upright position; which allows your body to adjust and compensate for your donation. A Donor Carer will explain the post donation advice card and ensure you are fully recovered before inviting you to move to the refreshment area where drinks and snacks are available.

AFTER YOU HAVE GIVEN BLOOD OR PLATELETS
• Make sure that you drink plenty of non-alcoholic fluids in the following 24 hours.
• Leave your dressing on for at least 6 hours.
• Take care of your arm by avoiding heavy lifting for the rest of the day.
• Avoid activities which may present a hazard to you or others if you happened to start feeling weak or light headed.
• Avoid strenuous exercise, and heat such as in saunas and hot baths.

If you feel unwell or if bleeding recurs, please follow the advice on the post donation card and tell us via our helpline on 0300 123 23 23.
OTHER INFORMATION

DONATING PLATELETS
Platelets are transfused to patients who need help to stop bleeding. They have a short shelf life (7 days) so we have to keep replenishing our stock. We extract platelets from donated whole blood, but they can also be donated specifically, using specialist machines at our donor centres. Platelets can be donated every 2-3 weeks, and each donation visit lasts between 90 minutes and 2 hours.

You cannot donate whole blood as well as being a platelet donor.

If you are interested in donating platelets please ask a member of staff for more details.

TESTING OF DONATIONS
When you donate, we will confirm your blood group and test your donation for HIV, hepatitis B, hepatitis C, Syphilis and hepatitis E. If your donation gives a positive result for any of these tests you will be contacted and offered advice; your donation will not be used. We perform extra tests on some donations either because of information you have provided (e.g. travel history) or to meet the special needs of certain patients (e.g. babies). These tests include malaria, sickle cell, HTLV and more detailed blood grouping. Please ask a member of staff if you would like to see more about the tests on your blood or visit www.blood.co.uk to view the information leaflet. Furthermore, we keep a sample of your blood for three years (or up to 30 years if your blood is frozen in our National Frozen Blood Bank) so in certain situations we may test your blood again in the future if a new test comes along.

The above tests are only conducted on FULL donations, underweight donations will not be tested. Please ask a member of staff for more information if you have any questions.

USING BLOOD AND PLATELETS
We use the vast majority of donations for patients e.g. after blood loss or cancer treatment. We would like you to know that your blood may also be used for purposes other than for direct transfusion to patients. As part of our commitment to a high quality service, we sometimes use donations for laboratory work, education, training, research and development or in the commercial preparation of healthcare related products, within NHSBT or by other organisations, which may involve export of your donation. An example of this is that we provide the plasma that is a by-product of your donation for use in the commercial production of blood test reagents and biochemical assays, which are essential for effective patient care. We would otherwise have to pay to dispose of the plasma, so using it for this purpose allows us to reduce wastage and keep our costs down. If we use your donation for any of these purposes, NHSBT will ensure that:
• ethical approval is obtained where appropriate
• there are no implications for your health or welfare
• you cannot be identified
• any income received is used for the benefit of NHSBT and the wider NHS.
YOUR INFORMATION
We keep records on donors, donations and test results for a minimum of 30 years. Some records will be held permanently.

WE USE THIS INFORMATION:
• to communicate with you, like sending session invitations or information about other donation matters
• to ensure the safety of all donors and patients, and the traceability of donations;
• for clinical audit to assess and improve our service
• for research, to improve our knowledge about the donor population and the possible health effects of blood donation. This may include linkage of your information to your other NHS records
• for management and administration.

To stay in touch, we may compare details with central NHS records or those of other data processors.

We are committed to protecting your confidentiality and to meeting our responsibilities under the Data Protection Act 1998. You can find out more, by reading our ‘Data Protection – A Guide for Donors’ leaflet. Please ask a member of staff.
POSSIBLE CONSEQUENCES OF GIVING BLOOD OR PLATELETS
– to be read by all donors

For the vast majority of people, donation is a simple and trouble-free experience, but you need to know there could be some consequences:

BRUISES
Minor bruising of the arm is common, this is usually harmless and will fade within a few days. To help stop bruising, you should avoid heavy lifting or manual work with your donor arm for at least twelve hours after donation and will be asked on session to apply three-finger pressure to the venepuncture site once your donation is complete. Should you develop a bruise, application of a cold pack (following the manufacturers’ instructions or ice in a bag, as long as your skin is protected by a cloth) will help reduce the size of the bruise. Some donors experience pain in their donor arm following donation. This is quite common and after 24 hours you should use the arm normally.

Sometimes more serious bruising of the arm develops (1 in 78)\(^1\) and can occasionally cause symptoms that include nerve irritation, swelling or restricted movement (1 in 3,333)\(^1\). If the bruising, pain or discomfort becomes severe, or does not resolve within seven days, you should seek advice from the NHSBT helpline or NHS 111.

FEELING FAINT
Some donors may feel faint (1 in 70)\(^1\) (light headed or dizzy, hot, sweating, trembling, shaky or nauseous), as a consequence of giving blood or platelets and a small number actually faint (1 in 625)\(^1\). There are a variety of reasons for this and there are things that you and our staff can do to help reduce the risk of this happening. Please follow the advice given to you. If you are at all concerned about feeling faint or fainting ask to speak to the nurse in charge.

Our staff are trained to care for you if you do feel faint and will make sure you do not leave the session until you are feeling well. Occasionally you may feel faint or actually faint quite a long time after donation, even the following day (1 in 1,600)\(^1\).

After donation, please drink plenty of non-alcoholic fluid, avoid strenuous exercise, or heat e.g. saunas and hot baths. Also avoid any activity that may be hazardous to you or others should you start to feel weak or light headed. If you do feel faint after leaving the session, lie down straight away and drink plenty of fluid. If your symptoms persist or you actually faint seek advice from the NHSBT helpline or NHS 111.

UNCOMMON RISKS associated with the venepuncture
Very infrequently, inserting the needle may cause inflammation of your arm, tendon injury (1 in 100,000)\(^2\), nerve injury (1 in 3,000)\(^1\) or puncture an artery (1 in 10,000)\(^1\). Our staff are trained to recognise these rare complications and you will be given immediate treatment and appropriate advice. If issues relating to such an incident occur after you leave the session you should contact the NHSBT helpline or NHS 111 for advice. If your problems persist then you should contact your GP.

\(^1\) NHSBT performance data 2010-14
\(^2\) NHSBT performance data 2012-14
Specific to Platelet donors

We test every platelet donation for bacterial contamination. There is an initial screening test of the platelets which, if positive for bacteria (usually from the skin), means we need to undertake confirmatory testing. The results of this can take up to a month, so if your platelet donation initially screens positive for bacteria our clinic staff will telephone you and advise you not to donate until the confirmatory testing has taken place. You should not be concerned for your health if you receive such a call. The majority of bacterial screening positive results are ‘false positives’ due to oversensitivity of the initial test, and the confirmatory testing will be negative. Where confirmatory testing is positive for bacteria, this is most usually due to failure of the skin cleansing process though more rarely it may be due to venepuncture technique, harness defect or processing error.

Anti-coagulant (citrate, ACD-A, Acid Citrate & Dextrose solution)

An anti-coagulant is used throughout the platelet donation process to stop your blood clotting within the platelet machine. The cyclic draw and return of blood to the machine during the donation process means that a small amount of the anticoagulant is returned in your blood. This can cause minor reactions with symptoms including tingling, vibration, restlessness, chilling and altered taste. You should inform a member of staff if you experience any of these symptoms so appropriate actions such as pausing the machine or slowing the return flow of blood can be made. If symptoms persist or become uncomfortable we will stop your donation.

The anticoagulant solution (Citrate) creates a mild effect on cardiac muscle function during the donation, which can cause harm if an underlying heart condition is present. To safeguard you we record your pulse rate and rhythm prior to all platelet donations and if necessary we will defer your donation and advise you to visit your GP for further investigations.

Chilling

You may experience this during the first few cycles of the donation flow. As the blood leaves the body to be processed in the donation machine it will start to reduce in temperature. This reduction in temperature may be noticed when the blood is returned, in the form of chilling or shivering.

Red Cell Loss

If we have to stop the donation process prematurely, some of your red cells will remain in the machine. This will not compromise your health; however, it will mean you must wait four weeks before your next donation to ensure there is no detrimental effect on your haemoglobin levels.
Lipaemia
Occasionally we need to stop platelet collection mid-donation due to the appearance and consistency of the donation. Lipaemia means there is a high concentration of lipids (fats) in the blood; a naturally occurring phenomenon that may cause the platelet/plasma donation to appear ‘milky’. It is caused or made worse by consuming a high-fat meal before you donate or if you have a high cholesterol level. We may not be able to use your donation as it could cause problems in the subsequent processing and testing.

Reducing the fat consumption in your diet for 24-48 hours prior to donating should prevent this occurring. Examples of things to avoid include Chinese or Indian takeaways, pasties and pastries, nuts, cheesecakes, and pizzas.

Reduced platelet production
Studies have shown that regular platelet donors show a drop in their own platelet levels which is more marked in regular long term donors. This should have no implication for your health and is an expected finding.

UNCOMMON RISKS ASSOCIATED WITH PLATELET DONATION

Air embolism
This is the inadvertent entry of air into your blood circulation. This has previously occurred with no adverse consequence to the donor (1 occasion, NHSBT 2009-2013). Safety features that have since been incorporated within the machine process and training means that this is now very unlikely to occur.

Haemolysis
This occurs when red cells get broken down in the machine by excessive centrifugal speed. This is very rare, as new technology alerts staff to potential issues, therefore protecting you and your donation (There have been no recorded cases in NHSBT 2009- 2014).

Iron deficiency
Regular platelet donors may become iron deficient. At each platelet donation you will lose up to 100ml of blood in the harness and sample pouch. So if you donate at the maximum frequency of 24 times a year, you could lose up to 2,400ml of blood, the equivalent of 4-5 blood donations. The finger prick test we do before your donation is to check your haemoglobin level (the amount of iron in your red cells) but does not indicate whether your iron stores are healthy or depleted. You cannot donate whole blood as well as being a platelet donor.
LET US KNOW
If you become unwell in the two weeks following your donation, or if you believe there is a reason that your blood should not be transfused to a patient, ring our Donor Helpline as soon as possible on 0300 123 23 23.

Please also read the Blood Safety information on page 10.
Thank you for wanting to give blood or platelets. Blood transfusion is very safe for patients because we take great care in choosing donors. Help us to keep it safe by reading this leaflet before you give blood or platelets. It will help you to decide if you should donate. If you are not sure, please ask to talk to a nurse in private. If you need more time, it is OK to leave. You can talk confidentially to a doctor or nurse by telephoning 0300 123 23 23.

All donations are tested for infection with hepatitis B and C, HIV, Syphilis and hepatitis E. These tests do not always show if you are infected. This is why we must take care in choosing donors and why you must not give blood to see if you are infected.

If you cannot give blood, we will explain why. If we find any of these infections in your blood, we will always tell you and offer advice and help.

Please read this leaflet carefully. If you need help, do please ask.

Thank you.

NHS Blood and Transplant

You must not give blood or platelets if:
- You think you need a test for HIV/AIDS or for hepatitis.

You must never give blood or platelets if:
- You are HIV positive
- You have hepatitis B
- You have hepatitis C
- You have ever had or been treated for Syphilis
- You have HTLV
- You have ever injected, or been injected with, drugs; even a long time ago or only once. This includes body-building drugs and injectable tanning agents. You may be able to give if a doctor prescribed the drugs. Please ask.

You must not give blood or platelets for at least 3 months after sex (even if you used a condom or other protective) with:
- A partner who is, or you think may be:
  - HIV positive.
  - A hepatitis B carrier.
  - A hepatitis C carrier.
  - HTLV positive.
  - Infected with Syphilis.
- A partner who has ever injected, or been injected with, drugs; even a long time ago or only once. This includes body-building drugs and injectable tanning agents. You may be able to give if a doctor prescribed the drugs. Please ask.

You must not give blood or platelets for at least 3 months after sex (even if you used a condom or other protective) with:
- (If you are a woman) a man who has ever had oral or anal sex with another man, even if they used a condom or other protective. There are exceptions, so please ask.
- A partner who has ever received money or drugs for sex.
- A partner who has, or you think may have been, sexually active in parts of the world where HIV/AIDS is very common. This includes most countries in Africa. There are exceptions, so please ask.

Worried about HIV or Hepatitis – Who can you talk to? There are several people you can talk to, such as the nurse on duty today or your GP. You can also call the National AIDS Helpline, which is specially set up for advice and assistance on HIV. Just call 0800 567123 at any time.
Please read this information if you are a regular donor
Please first read the Possible Consequences of giving blood or platelets (pages 6 to 8) and Blood Safety information (page 10).

BEFORE YOU DONATE:
• You need to fill in the ‘Health Check Questionnaire’.
• Have a short health screening interview, which includes your lifestyle and travel history.
• Read and sign the ‘Donor Consent’.

This is to be sure that you are well enough to donate blood and it’s safe to give to a patient. If you are not able to give blood, we’ll tell you why. You may be asked if it’s okay to contact your doctor for further information.

If you don’t wish to donate, you can leave at any time.

TESTS ON YOUR BLOOD:
• Blood group.
• HIV, hepatitis B, hepatitis C, Syphilis and hepatitis E. If there is a positive result for any of these, we will contact you and offer advice. Your donation will be discarded.
• If we use your donation for platelets we will test it for bacterial contamination.
• Extra tests are done as required e.g. malaria, sickle cell and HTLV.

The above tests are only done on FULL donations. Please ask a member of staff if you have any questions.

BLOOD USE
The vast majority of donations are used for patients e.g. after blood loss or cancer treatment. However, occasionally blood donations may be used for laboratory work, education, training, research and development by us or other organisations. Surplus donations and by-products may be used by NHSBT or commercial organisations to produce healthcare products. The money gained from this is used by NHSBT for the benefit of the NHS.

YOUR INFORMATION
We keep information on donors, donations and test results for at least 30 years. We are committed to protecting donor confidentiality and to meeting our responsibilities under the Data Protection Act 1998.

If you want to know more ‘Data Protection: A Guide for Donors’ is available. Please ask a member of staff.

LET US KNOW
If you become unwell up to two weeks after donation, or if you think there is a reason that your blood should not be used, just call our Donor Helpline on 0300 123 23 23 as soon as you can.

Thank you for reading this document.
NHS Blood and Transplant

NHS Blood and Transplant (NHSBT) saves and improves lives by providing a safe, reliable and efficient supply of blood and associated services to the NHS in England. We are the organ donor organisation for the UK and are responsible for matching and allocating donated organs. We rely on thousands of members of the public who voluntarily donate their blood, organs, tissues and stem cells.

For more information
Visit  nhsbt.nhs.uk
Email  enquiries@nhsbt.nhs.uk
Call   0300 123 23 23