

Donor consent

for platelets and plasma donation



Please read this booklet carefully before giving your consent to donate platelets or plasma.



Thank you



Giving platelets and plasma helps save and improve lives

Our expert team are on hand to look after you and make sure your donation is as safe as possible.

Like any clinical procedure, giving platelets and plasma is not without some risks and specific reasons some people why should not donate. It is important you understand these before you make a decision. This is called 'informed consent'. We have produced this booklet to give you all the information you need to make the right decision for you.

If you have any questions, or difficulties reading or understanding this information, our nursing team can help. If you want more time to consider donating and possibly rebook, you can leave and contact us on **0300 123 23 23**, or visit **www.blood.co.uk** to find out more.

Donation safety check

Each time you donate, you are asked to fill in a 'Donation safety check' which asks about your medical, lifestyle and travel history. You will then have a confidential health screening interview. This is to ensure you are well enough to donate and that it is safe to give your platelets or plasma to a patient. We will conduct the interview in private to help you 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 can return, and give you another appointment date. We may ask for your permission to contact your doctor for further information if required.

To ensure the health, wellbeing and safety of both our donors and patients, we test every donation for infections. When you donate, we will confirm your blood group and test your donation for HIV, hepatitis B, hepatitis C, hepatitis E and syphilis. If an infection is found, we will be in touch to offer you advice and support about what to do next. At your first donation you will also be tested for HTLV.

We hope you have a great donation experience.

Reasons you may not be able to donate

We at NHS Blood and Transplant make no judgement about people's choices or history. We are however required by law to not accept platelets or plasma donations where the following conditions apply.

You must NOT give platelets or plasma if:



you think you need a test for HIV or hepatitis

You must NEVER give platelets or plasma if:

HIV

you are HIV positive

Hep B

you have hepatitis B

Hep C

you have hepatitis C

Syphilis

you have ever had or been treated for syphilis

HTLV

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.

Note: You may be able to donate if a doctor prescribed the drugs. **Please ask us.**

Worried about HIV or hepatitis? – There are several people you can talk to, such as the nurse on duty today or your GP. You can also call the Terrence Higgins Trust, which is specially set up for advice and assistance on HIV. Just call 0808 802 1221 at any time.

You must NOT give platelets or plasma for at least 3 months after sex (even if you used a condom or other protection) if:

Anal sex

you have had anal sex with a new partner, or you had sex with more than one partner and had anal sex

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you have received money or drugs for sex



you have used drugs during sex

Note: This excludes erectile dysfunction drugs and cannabis.

You must NOT give platelets or plasma for at least 3 months after sex (even if you used a condom or other protection) with:

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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.

Note: You may be able to donate if a doctor prescribed the drugs. **Please ask us.**

£

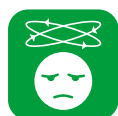
a partner who has ever received money or drugs for sex

Understanding the risks of donating platelets and plasma

With our many years expertise in managing donations, and the continuous improvements we make in clinical care, donating platelets or plasma is as safe as it can be. Although most people experience either no symptoms or very minor symptoms when they donate, it's important to us that you understand how you might be affected.

If you experience any side effects or feel unwell you should tell our staff immediately, or seek advice from the NHS Blood and Transplant helpline on 0300 123 23 23. Alternatively, you can call NHS 111.

To help you give informed consent to donate, we'd like to explain the risks and possible side effects. Not all side effects occur immediately, but it is possible you may experience them afterwards, so it is important to be aware of and follow the pre and post donation instructions we give you.



Feeling faint or dizzy

Sometimes you may feel faint whilst donating, or actually faint, which is why we ensure you have time to rest. Occasionally, people can sustain an injury if they faint. It is important that you have had your normal diet before you give your donation and have had plenty of fluids to drink. After donation you should drink plenty of non-alcoholic fluids. Avoid strenuous exercise and heat, such as saunas and hot baths.



Arm pain or bruising

It's fairly common to experience some discomfort in your arm following donation. 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 donation arm for at least twelve hours after donation. A cold pack can also help reduce bruising.



Complications relating to needle insertion

It's not common, however, there are risks with a needle insertion. These could include inflammation of your arm, scarring, tendon injury, temporary or permanent nerve injury or arterial puncture. Our expert staff are trained to keep you safe, and to give immediate treatment if needed.



Iron deficiency

When you donate blood components, you could lose up to 200-250mg of iron. In general, your body replaces that loss at the rate of only 1-2 mg per day (through a well-balanced diet). However, this varies and is dependent on your iron levels before donating, whether you are taking any iron supplements, and whether your diet contains enough iron. Some donors are more at risk of iron deficiency than others. They include younger donors, women of childbearing age and frequent donors. Iron deficiency symptoms can include tiredness and lack of energy, shortness of breath, noticeable heartbeats (heart palpitations) and pale skin. We check your haemoglobin levels before you donate.



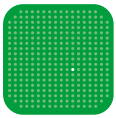
Allergic reactions

Some donors may experience an allergy to the dressing we use, or the chlorhexidine used to sterilise your arm. Most allergic reactions are mild, causing sneezing, a runny or blocked nose, red, itchy, watery eyes, wheezing and coughing, tingling and swelling of lips and tongue, a red, itchy rash, or worsening of asthma or eczema symptoms. Very occasionally a severe and potentially life-threatening reaction called anaphylaxis or anaphylactic shock could occur.



Deep vein thrombosis (DVT)

A DVT (blood clot) in the arm is a known complication with platelet and plasma donation. This is more likely for donors over the age of 60, who are overweight, smoke, had a previous blood clot or DVT, are taking the contraceptive pill or hormone replacement therapy (HRT), have cancer or heart failure.



Extremely rare complications

Complications resulting in a heart attack or stroke which can be life-threatening have been reported. These are extremely uncommon and in the last ten years there have been no incidences as a direct consequence of donating platelets or plasma in England.



Anticoagulant side effects

An anticoagulant is a solution used to stop blood clotting and more commonly known as blood thinners. An anticoagulant is used throughout the component donation process to stop your blood clotting within the machine. The anticoagulant used is a citrate-based anticoagulant known as sodium citrate or acid, citrate and dextrose solution (ACD-A). During the donation a small amount of anticoagulant is returned in your blood which may cause a lowering of the levels of calcium and magnesium in your blood. This can cause minor reactions with symptoms including tingling, vibration, restlessness, chilling and altered taste. It is important that you tell us if you experience any of these symptoms as we can manage this for you. Long term side effects of anticoagulant can include osteopenia, a reduction in bone density, but this is very rare.



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 cool. This reduction in temperature may be noticed when the blood is returned, in the form of chilling or shivering.



Protein loss

Plasma contains over 700 proteins and other substances which are essential for blood clotting, fighting infection and making sure fluid doesn't leak out of your blood vessels. During a plasma donation your protein levels will drop but this should not cause you harm. The main symptom of low blood protein levels is swelling (especially in the legs). We test your protein levels annually or after every eight donations to minimise the risk of any harm occurring as a result of the drop in the protein levels.



Lipaemia

Occasionally we need to stop component collection mid-donation due to a high concentration of fat in the blood, known as lipaemia, which can cause the donation to appear 'milky'. It can be caused or made worse by consuming a high-fat meal before you donate or by a high cholesterol level.



Haemolysis and air embolism

Haemolysis is the breakdown of red blood cells and this can occur in the machine though it is extremely rare. It is possible that air may enter your blood stream but, with enhanced safety protocols, this too is rare.

Fairly common

(1 in 10 - 1 in 100)

Feeling faint
Bruising

Uncommon

(1 in 100 - 1 in 1,000)

Fainting
Arm pain
Re-bleeding
Local inflammation

Rare

(1 in 1,000 - 1 in 10,000)

Nerve injury
Nerve irritation
Arterial puncture

Very rare

(1 in 10,000 - 1 in 100,000)

Allergic reaction
Tendon injury

Extremely rare

(1 in 1 million)

Deep vein thrombosis (DVT)
Anaphylaxis
Thrombophlebitis
AV fistula
Compartment syndrome
Other cardiovascular events

Additional things to consider with platelet and plasma donation

When donating platelets, we test both your platelet count and for any bacterial infections. Due to the sensitivity of the test, we may need to take a secondary test, and if confirmed positive this may prevent you from donating. For plasma donations we will be testing your protein levels at your first donation and then every 8 donations or once a year whichever is sooner, to ensure your donation can be used. Our team will contact you to advise in more detail, if your results are outside of a normal range, what this means for you and your donation.

Definitions

Platelets

Platelets are tiny blood cells that help your body form clots to stop bleeding. If one of your blood vessels gets damaged, it sends out signals to the platelets. The platelets then rush to the site of damage and form a plug (clot) to fix the damage. Most platelet donations are given to patients who are unable to make enough platelets in their bone marrow. For example, patients with leukaemia or other cancers may have too few platelets as the result of their disease or treatment.

Fresh frozen plasma

Fresh frozen plasma (FFP) contains clotting factors and is usually given alongside red cells and platelets to help stop critical bleeding when patients have lost a large amount of blood or have problems with the way their blood is clotting.

Plasma for medicine

Plasma for medicine (PFM) is where we work with manufacturers to create lifesaving medicines by separating proteins from the whole blood. These medicines will be used to treat patients who have infections (immunoglobulins) and bleeding (clotting factors and albumin). We can collect this from all the whole blood, platelets, and plasma donations. NHS Blood and Transplant is a non-profit organisation and part of the NHS. Any income generated is used to improve services for patients in the wider NHS.

If we stop the donation process early, some of your red cells may remain in the machine. This will not affect your health; however, it will mean you must wait four weeks before your next donation to ensure there is no harmful effect on your haemoglobin (iron) levels.

How we use your platelets or plasma to save and improve lives

In some cases, we are unable to use your donation for direct transfusion to patients. This may be for a number of reasons including test results, processing issues or information we receive after donation.

As part of our commitment to a high-quality service, we sometimes use donations for laboratory work, education, training, research and development, which may include DNA studies and export. Donations may also be used in the preparation of healthcare related medicinal products, within NHSBT or by other organisations which could be outside the UK. These are essential for effective patient care. If we use your donation for any of these purposes, we will ensure that:

- ethical approval is obtained where appropriate
- there are no implications for your health or welfare
- you cannot be identified; this includes any work involving DNA studies
- any income generated is used for the benefit of NHSBT and the wider NHS. NHSBT is a non-profit organisation
- no DNA analysis is performed that may identify you without your specific/explicit consent (which will be in addition to this leaflet and discussed with you separately)

To ensure the platelets and plasma collected is safe for patients and the donation process is safe for donors, there are several conditions, complications and test results that could result in either a temporary or permanent withdrawal from platelet or plasma donation. We follow the guidance set out by JPAC (Joint United Kingdom (UK) Blood Transfusion and Tissue Transplantation Services Professional Advisory Committee) when deciding whether you can continue donating. If there are any concerns a member of our Clinical Support Team will contact you to discuss the issue further, giving you the opportunity to ask any questions that you may have. We have to adhere to this guidance to ensure the safety of platelets and plasma supply.

How we use your data and protect your privacy

We keep records on donors, their donations and test results, for a minimum of 30 years. Some records will be held permanently. We are required to keep this information to ensure the traceability of donations. We cannot delete some of this information, even at your request. We use this information:

- to communicate with you, including 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 platelet and plasma 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 2018, which constitutes the UK implementation of the General Data Protection Regulation (GDPR).

For more information on GDPR or to get free, independent advice on your privacy rights, visit the Information Commissioners Office website at www.ico.org.uk or contact our customer services team on 0300 123 23 23 or by email customer.services@nhsbt.nhs.uk.

More information on how we use data is available on our privacy notice which can be found at www.blood.co.uk.

Giving consent to donate

In reading this leaflet and signing the form at the time of donation I am giving my consent to donation and the following:

1. I have read and understood the additional information provided to me today about giving platelets or plasma. I understand the donation process and the risks outlined in the consent information. I understand that despite mitigating measures, some of these risks may still occur. I have had the opportunity to ask questions and these have been answered to my satisfaction.
2. I agree that my donation will be tested for the infections listed above and that there may be additional tests on my platelets or plasma done either because of information I have provided (eg travel history) or to meet the special needs of certain patients (eg babies). I understand that a sample of my platelets or plasma will be kept for three years and in certain situations NHSBT may test my platelets or plasma again in the future if a new test comes along. I understand that if my donation gives a positive result for any of the microbiological tests, I will be contacted, and the results will be discussed with me.
3. I give my platelets or plasma to NHS Blood and Transplant to be used for the benefit of patients. I understand that this will be for direct transfusion and if not suitable used to make products used for the diagnosis, prevention and treatment of disease or for laboratory work, education, training, research and development purposes.
4. I understand that there are several reasons, either due to test results or any significant complication, when I will not be able to continue donating platelets or plasma. I will be informed by NHSBT and will be able to discuss this if I wish.
5. I understand that my information and any test results will be kept on record for a minimum of 30 years to ensure the safety of patients and the traceability of donations. This is in accordance with the Data Protection Act 2018, the Blood Safety Quality Regulations 2005 and the General Data Protection Regulation (GDPR).
6. I understand that failing to answer any question as fully as possible and to the best of my knowledge, could lead to possible harm to me as a donor and/or an unsafe donation which could potentially cause patient harm or death.

NHS Blood and Transplant

We save and improves lives by:

- providing a safe, reliable and efficient supply of blood and associated services to the NHS in England
- being the organ donor organisation for the UK, responsible for matching and allocating donated organs
- developing potentially life-saving treatments at the forefront of emerging technologies

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**