

# Donor Instructions for Allogeneic Bone Marrow Collection



## What Does It Mean To Be A Donor?

You or your child has decided to be a bone marrow donor for a family member or another person. This information will answer some questions you may have about being a donor. It also has information about how to care for yourself or your child throughout the donation process. You may ask questions at any time about this procedure.

## What Is Bone Marrow?

Bone marrow is found in the center of your bones. It is where stem cells are made. Stem cells are able to make new cells.

## Donor Testing

Before the procedure, we will test the donor to see if they can donate. These tests are done to protect the health of the donor and the person getting the donation. You and your child have the right to see the results of donor tests.

## Alternative Collection Methods

We may ask you or your child to donate peripheral blood stem cells (PBSC) instead of bone marrow. This is done if you or your child cannot donate bone marrow, or if the Transplant Team decides that PBSCs are better for the transplant. If asked to donate PBSC, we will ask you to sign another consent from.

## How Do I Care For Myself or My Child Before the Procedure?

1. Do not take non-steroidal anti-inflammatory drugs (NSAIDs) from now until the time of the procedure. These medicines may cause bleeding after the procedure. NSAIDS include:
  - Aspirin
  - Advil
  - Aleve
  - Aspirin
  - Bufferin
  - Ibuprofen
  - Motrin
  - Naprosyn
  - Nupri
2. You may take acetaminophen (such as Tylenol) for pain or headache.
3. Do not use alcohol or tobacco for at least 2 to 3 days before donation.
4. Take a multivitamin with iron every day as soon as possible. This will help your body make red blood cells and prevent anemia (low red blood cells) after the donation.
5. Avoid any physical activity or behavior that may cause harm or injury.

## What If My/My Child's Health Status Changes Before the Procedure?

Please contact us if a cold, flu, rash, cough, urinary tract infection, or any infection develops. Please also contact us if there are any changes in normal health status. You can always call for any questions or concerns. You can find important phone numbers at the end of this sheet.

## Transplantation and Cellular Therapy Program

4650 Sunset Blvd., Los Angeles, CA 90027 | CHLA.org

Approved by PFE 08/15/23

## Preparing For the Procedure

1. Bathe or shower the night before with an antimicrobial (germ fighting) soap.
2. Sleep on clean bed sheets/linens.
3. Wash hair with regular shampoo.
4. Use a clean cloth to scrub the skin. Do not use a loofa or any bath sponge that you can use again.
  - a. Do not shave the surgical area (the part of the body where the procedure will happen).
  - b. Rinse the body well to remove all soap.
  - c. Use a clean, soft towel and pat dry.
5. Wipe the surgical area (pelvic bone) with a Chlorhexidine Gluconate (CHG) wipe. CHG is a solution that fights bacteria and helps prevent infection related to surgery. Allow it to air dry. If there is a known CHG allergy, please let the Transplant Team know.
6. Put on clean clothes or pajamas.
7. Not use any lotions, deodorants, perfumes, or powders.
8. Do not eat or drink anything after midnight the night before the procedure.

## What Happens On the Day of the Procedure?

On the day of the procedure, we will clean the surgical area with CHG wipes. If there is a known CHG allergy, please tell the nurse.

After the bone marrow collection procedure, you will move from the procedure room to the surgical unit. You or your child will go home later that day. A nurse or doctor will check on you before you leave.

## How Is Bone Marrow Collected?

We collect Bone Marrow through a procedure called bone marrow aspiration. It is surgery that is done under general anesthesia (a medicine that puts the patient to sleep). We put needles into the back of the pelvic to take out bone marrow. We get this from your or your child's pelvic bone. There will be some blood loss during the procedure. We will give intravenous (IV) fluids through the veins to make up for any loss of blood. If necessary, we will give albumin (a blood protein) and/or a blood transfusion during or after the procedure. When we finish the procedure, we will place a pressure dressing on the surgical area.

We will keep you in the recovery room for a short period of time for recovery from anesthesia. We will continue to give IV fluids until fluid can be taken by mouth. Before you go home, we will give you a prescription for pain medicine and iron therapy if needed.

## Donor Risks

This procedure needs us to use anesthesia (a medicine that puts the body to sleep). The anesthesiologist will talk about the risks of anesthesia to you and/or your child.

During a bone marrow donation, we will insert special needles into the pelvic bone. We may need to do this many times to collect enough bone marrow. There may be pain at the surgical site afterwards. This pain may last for 1 to 2 weeks. Pain medicine can help to relieve the pain.

This procedure may also cause:

- Needle marks in the skin after aspiration procedure (but this should fade within time).
- Infection. This procedure is done with sterile (clean) tools and careful techniques. However, there is still a risk of infection at the area where the needle goes into the pelvic bone.
- Fracture (break) of the bone that we take the bone marrow from (small risk).
- Bleeding
- Infection
- Low red blood counts (hemoglobin). Blood counts should improve to normal within a few weeks. It may be necessary to take an iron supplement. In some cases, the Transplant Team may decide that a blood/platelet transfusion is necessary. Transfusion risks include:
  - allergic reactions
  - fever, chills, or rash
  - decrease in blood pressure
  - Difficulty breathing (this is rare)
  - Infection with certain viruses such as hepatitis, Cytomegalovirus (CMV), human immunodeficiency virus (HIV) virus that causes acquired immunodeficiency syndrome (AIDS) (this is rare). We test all blood donors for these and other viruses. You may request “directed donor” donations (blood donation from someone you know) of blood and platelets. There is no measurable difference in the safety of donations from general volunteer donors versus directed donors.

### Donor Benefits

This procedure has no direct benefit to you as a donor. But may help save, extend, or improve the life of the person who needs it.

### What Happens After the Procedure?

Your or your child’s pelvic area might be sore for a few days to a few weeks. It is important that you take the pain medicine so you can keep yourself or your child as comfortable as possible. After 24 hours from the procedure, you or your child need to take out the dressing over the aspiration sites on your or your child’s back. You or your child should take/give a shower and wet the pelvic dressing to make it easier to take off. Look at the puncture sites (areas where we put in the needle) for any problems. Dry area with a clean cloth or towel and put on antibacterial ointment. Cover area with small bandages. Continue this for 3 days after the procedure. Look at your or your child’s pelvic area daily and call us if you or your child have any questions or start to get any problems listed below.

Do not sit in water (bath water, pond, pool) for at least a week. You or your child must shower every day for at least 3 days. You or your child must dry and clean the puncture site fully.

Do not play contact sports/games, do heavy weightlifting, acrobatic exercise, and other activities that can hurt the pelvic bone.

## **Call CHLA Transplant Team if you or your child feel(s) any of these symptoms:**

- Rash
- Increased redness
- Increased pain
- Severe bleeding
- Fever greater than 101F
- Yellowish or pus-like drainage from the puncture
- Any other unusual symptoms

Call 911 for any serious emergency.

If you are an outpatient, you can call (323) 361-2546 on Monday through Friday, 8 a.m. to 5 p.m. You may need to leave a message. You can call the hospital number (323) 660-2450 during the evening, nighttime, and weekends or holidays. Ask for the doctor on-call (doctor who is there) for Transplantation and Cellular Therapy. They may ask you to leave a message with the page operator, and the doctor on-call will return your call as soon as possible. If you or your child is an inpatient, you may ask one of your care providers or doctors to see you or your child.

### **Disclosure**

We will protect you or your child's medical information and privacy. If required and medically or administratively necessary, law and regulatory agencies may look at your or your child's health information.

Case histories, results of treatment, laboratory and pathologic data, photographs, and x-ray may be used and/or published for scientific purposes. If we use any information, we make sure to protect and do not share your or your child's identity. We will keep your or your child's privacy.

### **Voluntary Participation**

We view this donation as voluntary. This means you or your child may choose not to donate at any time. If you or your child chooses not to donate, please let the Transplant Team know before the person getting the donation begins chemotherapy and/or radiation. If the person who needs the donation begins chemotherapy and/or radiation and donation is not given, it can be deadly for them.

Your or your child's choice not to donate or to take back consent will not change your or your child's medical care at Children's Hospital. If you or your child have/has additional questions about this donation, the Transplant Team will try to answer all of them.

Use the information on this sheet with advice from healthcare providers at Children's Hospital Los Angeles. CHLA makes no warranties of any, expressed or implied, about bone marrow collection.