Donor Instructions for Allogeneic Apheresis Collection



What does it mean to be a donor?

You or your child has decided to become a peripheral blood mononuclear cell (MNC) or peripheral blood stem cell (HPC, Apheresis) donor for a family member or another person. This information will answer 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.

Donor Benefits

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

Voluntary Participation

This donation is voluntary.

- You/your child may choose not to donate at any time. If you/your child chooses not to donate, please let the Transplant Team know before the person who needs the donation begins chemotherapy and/or radiation. If the person who needs the donation begins chemotherapy and/or radiation and product is not given, it can be fatal 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.

Donor Testing

Before the procedure, we will check the donor to see if they are able to donate. Donor testing may include but is not limited to:

- Complete blood work including tests for diseases
- Outside donor clearance with personal doctor
- History & physical
- Meeting with a donor advocate
- Survey about disease risk

What Is Apheresis and Mobilization?

- Apheresis is a process that takes out blood and separates it into parts. The machine removes the
 cells we need and gives the rest of the blood back to you/your child.
 - HPC, Apheresis are peripheral blood stem cells. We get these cells by apheresis, a process that takes the HPC cells out.
 - MNC, Apheresis are peripheral blood mononuclear cells. We get these cells by apheresis, a process that takes the MNC cells out.
- If HPC apheresis is being collected, you/your child will get high dose growth factor (G-CSF) shots for a few days before the day of collection. This "mobilization" will help with the growth of white blood cells and move stem cells into the blood.
- On the day of or the day before collection, we will do a CD34 count and CBC blood test to see how well the mobilization worked. If there is low to no mobilization, a shot of Mozobil (a.k.a. Plerixafor) may be given.

HemOnc/BMT

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

- If you/your child has pain or a headache due to G-CSF, you may take acetaminophen such as Tylenol. Do not take aspirin or other non-steroidal anti-inflammatory drugs (NSAIDs) such as Advil, Aleve, Aspirin, Motrin, or Ibuprofen.
- Do not use alcohol or tobacco for at least 2 to 3 days before the donation
- You/your child can take a multivitamin with iron to help your body make red blood cells and to prevent anemia (low red blood cells) after collection

What Happens on the day of Collection?

- Apheresis collections happen in our Infusion Center or on an inpatient unit. We place a temporary catheter so that the apheresis machine can connect to you/your child. Sometimes we use peripheral veins (arm, leg) instead.
 - o If you/your child needs to take medicine to keep you or them calm do not eat or drink anything after midnight the day before the catheter placement procedure.
- Before starting the collection, the Apheresis Team doctor will come see you/your child and have you/them agree to the procedure. A nurse will do the collection through an apheresis machine.
- You/your child's blood will go through the apheresis machine to take out and collect the stem cells.
 The procedure can take 4 to 6 hours to get enough cells. Plan to be here all day.
- At the end of the procedure, a medical staff member will see you/your child and will take blood samples. The doctor will see if you/your child need more days of collection or more G-CSF or Mozobil. If you/your child do not need more collections, you will be able to go home. If you/your child had a temporary catheter put in, we will take it out.

Procedure Risks

- The most common side effect of G-CSF is bone pain. Other side effects include low-grade fever, chills, and weakness. You/your child can take Tylenol to reduce discomfort. Always take you/your child's temperature before giving Tylenol. Let a doctor know if you/your child has a fever before giving Tylenol.
- We will watch you/your child closely during the whole procedure. We will check for changes in vital signs (e.g., temperature, pulse, respiration, etc.), signs of an allergic reaction, or electrolyte abnormalities. We will give pre-medications to you/your child to prevent reactions.
- Bleeding and infection are possible but rare side effects. You/your child will take an anticoagulant (a medicine to stop the blood from clotting during collection). The apheresis team uses safe and clean steps for this process. It is common for the temporary line area to bleed, so we will check on it.

Disclosure

We will protect you/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 use 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.

This instruction sheet is intended to be used only in conjunction with professional guidance from healthcare providers at Children's Hospital Los Angeles. CHLA makes no warranties, expressed or implied pertaining to Apheresis collection.

HemOnc/BMT