LB.34 The blood bank develops acceptance criteria for blood donors.

LB.34.1 The laboratory implements criteria for accepting blood donors to minimize the risk of harm to them. The criteria include:

LB.34.1.1 Whole blood is not collected from a donor weighing less than fifty Kilograms or under seventeen years of age.

LB.34.1.2 Whole blood is not collected from a donor more frequently than once every eight weeks and not from donors who donated apheresis product less than forty-eight hours ago.

LB.34.1.3 The blood pressure and pulse rate of prospective donor are within normal ranges; Diastolic blood pressure less than 100 mm Hg, Systolic blood pressure less than 180 mm Hg and pulse rate between 50-100 beats/minute.

LB.34.1.4 The hemoglobin level of the prospective donor should be greater than 12.5g/dL or a hematocrit of more than 38%.

LB.34.1.5 The prospective donor has no history of heart or lung disease.

LB.34.1.6 Female donors are not pregnant or have been pregnant within the last six weeks.

LB.34.1.7 Prospective donor's history is evaluated and the donor examined by a qualified person before whole blood collection.

LB.34.2 The policies and procedures minimize the risk of harm to blood recipients by preventing donations by individuals who has:

LB.34.2.1 Evidence of disease transmissible by blood transfusion.

LB.34.2.2 Conditions thought to compromise the suitability of the blood or blood component.

LB.34.2.3 Body temperature exceeding 37.5C.

LB.34.2.4 History of liver diseases, cancer or bleeding tendency.

LB.34.2.5 History of laboratory or clinical evidence for viral hepatitis, HIV, HTLV.

LB.34.2.6 History of laboratory or clinical evidence for malaria within the last three years.

LB.34.2.7 History of syphilis treatment or unconfirmed test result for syphilis within the past twelve months.

LB.34.2.8 Been excluded as per the current recommendations for the prevention of HIV infection.

LB.34.3 The prospective donor's travel history checked against the current travel deferral list for the risk of HIV, vCJD and Malaria.

LB.34.4 The prospective donor's medications checked against current deferral list. Other medications are assessed by the blood bank physician.

LB.34.5 The prospective donor's vaccinations checked against the current vaccination deferral list. Other vaccinations must be assessed by the blood bank physician.

LB.34.6 Prospective donor's arms are free of lesions suggestive of skin disease or parenteral drug abuse.

Standard Intent:

Prospective blood donors must feel healthy and well on the day of donation. The administered donor history questionnaire and physical examination is intended to ensure that the donor is in good general health and will tolerate the collection procedure, moreover, the collected blood will not harm the recipient.

LB.35 The blood bank develops acceptance criteria for platelets pheresis donors.

LB.35.1 The laboratory implements additional acceptance criteria for platelet pheresis donors. The criteria include:

LB.35.1.1 Donation Intervals meet the following conditions: eight weeks after whole blood donations, not more than once every forty-eight hours, not more than twice a week, not more than four times a month, not more than twenty-four times a year, and eight weeks after failure to return the donor red cells during apheresis procedure or the total RBC loss during apheresis procedure exceeds 200 ml.

LB.35.2 Use of medications that inhibit platelet function (such as Aspirin and Piroxicam) defers the platelet apheresis donation for seventy-two hours after the last dose.

LB.35.3 The prospective apheresis donor should have a qualifying platelet count of more than 150,000/µl.

LB.35.4 The acceptance criteria of blood donors outlined in this chapter apply.

Standard Intent:

Platelets collection by apheresis follows many of the same rules and guidelines that apply to whole blood donation, Except, Platelet pheresis donors may donate more frequently than whole blood donors. Additionally, prospective platelet pheresis donors must have platelet count be above 150,000/µL and should not have taken antiplatelet medications that irreversibly inhibit platelet function are deferred for specific intervals. Platelet pheresis donors must be given information so that their consent to donate is informed.

LB.36 The blood bank has a process for consenting blood donors.

LB.36.1 The laboratory implements a process for consenting blood donors to ensure:

LB.36.1.1 Receiving explanation of the donation procedure.

LB.36.1.2 Being informed about the risks of the procedure.

LB.36.1.3 Being informed about the tests performed and the risks of transmission of infectious diseases.

LB.36.1.4 Being informed about the donor confidentiality and the requirement to report test results to health authorities.