
Standard Intent:

The specific procedure used for collection site preparation may vary but should include directions for the chemicals to be used, the time and manner that each is applied and the exact sequence of the steps taken so that bacterial contamination of the collect product is minimized. Donor arm preparation should be monitored to assure that the procedure is followed. Although a variety of skin preparation techniques are available, the application of iodine following use of isopropyl alcohol is most effective in reducing skin organisms. Some donors may have allergies that preclude the application of topical iodine; alternatively, effective measures may be used in such cases; the use of chlorhexidine is preferred.

Blood or blood components' collection sets must be pyrogen-free and identified by a lot number. Additionally, collection containers must be equipped with a diversion pouch to allow diversion of the first 30 to 45 mL of blood. The diversion pouches effectively capture the "skin plug" cored by the phlebotomy needle, resulting in decreased bacterial contamination. Blood in the pouch is subsequently used to fill sample tubes for donor testing.

Donor care starts from continuously observing the donor for signs or symptoms of reactions during and after blood collection. If the donor tolerates the procedure, he/she should remain reclining on donor chair for at least five minutes then allowed to sit up under close observation. If the donor condition continues to appear satisfactory, the donor should be walked to the observation/refreshment area and given the post donation instructions. The donor observation should be continued for at least another five minutes during which the donor is encouraged to drink fluids while waiting to be released. If the donor chooses to leave before being released, such an act must be documented in the donor records.

After any collection procedure, blood donors must be given post-donation information which provide another opportunity to educate the donor. The post donation information should include description for the process of confidential-self unit exclusion as a measure to improve the safety of blood inventory. Donors should be instructed to call blood center if they believe that their blood should not be transfused or if they have any concerns about the safety of their blood. The provided contact number should be available 24/7.