

THE UNIVERSITY OF TEXAS
MD ANDERSON
CANCER CENTER

INFORMATION FOR POTENTIAL BLOOD/PLATELET DONORS

If you wish to become a blood or platelet donor, you will find below some important information regarding the locations of M. D. Anderson's collection facilities, the hours of operations, some pre-donation facts, and some donor selection criteria. We hope that this will be of benefit to you. If after you have read this information and still have some questions, please call the blood bank at 713-792-7777.

GENERAL BLOOD/PLATELET DONOR REQUIREMENTS:

- ☺ Social Security Number or Passport Number and Picture Identification
- ☺ Feeling good, and have not had any recent serious illness
- ☺ Age 17
- ☺ Weigh at least 110 pounds (platelet donors at least 100 pounds)
- ☺ Hemoglobin at least 12.5 grams
- ☺ Should eat a good low-fat meal within 4 hours, and avoid high fat meals within 24 hours
- ☺ Have acceptable pulse and blood pressure
 - ☺ Platelet Donors = No aspirin, aspirin containing products, or herbal products (Ginseng, ginkgo, garlic, or ginger), 36 hours prior to donation (acceptable for a whole blood donor)
 - ☺ No Ibuprofen or Advil products within 24 hours of donation
 - ☺ No Whole blood or Platelet donation in past 72 hours
 - ☺ Acceptable Platelet and White Blood Count

YOU SHOULD NOT DONATE PLATELETS OR BLOOD IF YOU:

- ☺ Are not feeling well
- ☺ Pregnant now
- ☺ Have taken Accutane®, Proscar®, or Propecia® in the past 4 weeks
- ☺ Are on certain medications or have had a recent vaccination.
(Many are fine, so please call the Blood Bank to answer any of your medication questions)
- ☺ Had dental work in the past 24 hours
- ☺ Had chest pain, heart disease, or lung disease
- ☺ Have ever had cancer, a blood disease, an abnormal bleeding problem, or hemophilia
- ☺ Had major surgery in the past 12 months
- ☺ Have been under a doctor's care for a recent major illness
- ☺ Had hepatitis (after age 11), yellow jaundice, liver disease, or positive test for hepatitis after your 11th birthday.
- ☺ Have lived or visited in the United Kingdom (England, Northern Ireland, Scotland, Wales, the Isle of Man, or the Channel Islands) from 1980 through 1996 for a total or more than 3 months
- ☺ Have spent time in Europe from 1980 to present that adds up to 5 years.
- ☺ Have spent a total time of 6 months with a military base from 1980 through 1990 in the countries of the United Kingdom, Belgium, The Netherlands, or Germany
- ☺ Have spent a total time of 6 months with a military base from 1980 through 1996 in the countries of Spain, Portugal, Turkey, or Greece.
- ☺ Traveled to countries considered endemic for malaria in the past 12 months
- ☺ Have had malaria, or lived in a country considered endemic for malaria in the past 3 years

- ☺ Had psoriasis ever treated with Tegison®, or with Soriatane® in the past 3 years.
- ☺ Had mononucleosis in the past 6 months, or a cold sore now
- ☺ Have received GG (Hepatitis B Immune Globulin), clotting factor concentrates, blood or plasma, had a needle stick injury, or mucous membrane exposure to blood in the past 12 months
- ☺ Had intimate contact with someone with hepatitis or yellow jaundice in the past 12 months
- ☺ Have ever received human pituitary-derived hormones, such as growth hormone or gonadotropins
- ☺ Have had a tattoo, skin piercing, or non-sterile ear piercing or acupuncture in the past 12 months
- ☺ Born, lived in, or recent travel to certain African countries since 1977, or had sex with someone from these countries
- ☺ Had Chagas Disease, Babesiosis, Lyme Disease, or family history of or been told to be of risk of having Creutzfeldt-Jakob Disease
- ☺ Had convulsions (seizures), or epilepsy
- ☺ Have a persistent cough or shortness of breath
- ☺ Have had unexplained weight loss or diarrhea in the past 10 days
- ☺ Have had recurring fever or night sweats for more than 10 days
- ☺ Have persistent swelling of nodes (glands) in your neck, groin, or under your arms for more than one month
- ☺ Have persistent white spots or unusual blemishes in the mouth
- ☺ Have been treated for or had gonorrhea or syphilis in the last 12 months, or have herpes (coldsore) now.
- ☺ Have had a positive test for the AIDS virus
- ☺ Have given money or drugs to anyone to have sex with you in the past 12 months
- ☺ Incarcerated for more than 72 hours in the past 12 months.
- ☺ Males only: had sex since 1977 (even once) with another man
- ☺ Ever injected illegal drugs into yourself
- ☺ Had sex in the past 12 months (even once) with a hemophiliac, I. V. drug user, anyone taking clotting factor concentrates, or a man who had sex with another man
- ☺ Engaged (even once) in prostitution
- ☺ Had sex (even once) with a person who has AIDS or tested positive for the AIDS virus (HIV)
- ☺ Ever been notified of a positive Hepatitis B or C test, HTLV-I/II, or elevated ALT (liver enzyme)

A sample of blood will be processed to meet all FDA required testing. The blood will be tested for antibodies to HIV and other infectious disease markers. If this testing indicates that you no longer should donate blood, or blood products, your name will be entered on a list of indefinitely deferred donors and you will be notified by mail.

Cancer patients cannot easily fight even the most common infections. Therefore it is critical that our blood supply is safe for their needs. Any information that you give us is **STRICTLY CONFIDENTIAL** and will not be disclosed to anyone.

The credit program allows a patient to receive one \$10.00 credit for each donation made in their name, to be applied to their blood charges. This donation credit for a particular patient does not allow the platelets to be saved until needed, nor does it guarantee available platelets at a future date.

We thank you for your donation and welcome any questions that you might have in regard to the donor screening or your donation.

BLOOD BANK, HOUSTON, TEXAS. 713-792-7777