

56-45 Main Street Flushing, NY 11355

Questions and Answers

GIVING BLOOD IS SAFE FOR DONORS

Blood donations are urgently needed to help patients

Please read this brochure before your health history interview. It contains information you should know before you donate blood.



Blood Donor Center 8th Floor South

Telephone: 718 670-1007 Fax: 718-661-7977

How do I know if I can give blood?

If you are 17 years of age or older, weigh at least 110 lbs. and in good health, chances are y ou can give blood. People over 75 can donate blood if they meet all the criteria and present a physician's note.

We must see an official form of identification before we can take your blood donation. It is a gover nment regulation. You will also need your Social Security number, or visa or passport.

Can I spare the blood?

Yes. A donation consists of a pint of blood and the body begins to replace it immediately. Giving a unit of blood in no way weakens your system.

Should I eat before donating?

Yes. Eat at your regular meal time. Do not miss a meal, and drink extra fluids before and after donation.

Can a donation be made by a person wh uses drugs or smokes pot?

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Not if drugs are taken by needle and not while the person is under their influence.

Can I donate if l've had my ears pierced or undergone acupuncture?

Yes. If that was done with single equipment. Otherwise, you ca nonths after the procedure. Persons who have been tattooed must also wait for 12 months before donating.

Does exposure to certain infectious di ease mean I should not give blood?

Yes. These diseases are listed below:

Syphilis —Persons with active syphilis are d eferred for 12 months.

Malaria —Persons who have visited countries where malaria exists are deferred for 12 months after leaving the malarious area. Pe sons who emigrated from countries where m laria exists are deferred for three years after

Acquired Immunodeficiency Syndrome (AIDS) -Persons who have AIDS or the symptoms of AIDS should not give blood. These are described in the next section.

they enter the United States.

Persons at increased risk of AIDS:

Public Health authorities state that the following people should not donate blood:

- Past or present users of intravenous (IV) drugs
 Any man who has had sexual contact with
- another man since 1977, even once
 People with hemophilia or related clotting disorders
- People with a positive antibody test for the AIDS virus
 Sexual partners of AIDS patients or of people in any of the above categories
 - Men and women who have had sex for money or drugs since 1977
 - People who have had sex with a male or female prostitute within the past 12 months
- People who have had or been treated for syphilis or gonorrhea, chlamydia, genital herpes, or venereal warts within the past 12 months.

Persons with symptoms of AIDS who should not donate blood include:

- donate blood include:Swollen glands: enlarged lymph nodes in the
 - neck, armpits or groin with or without pain

 Pink or purple, flat or raised, blotches or bumps inside the mouth, nose, eyelids or rectum on or
 - under the mouth, nose, eyellos or rectum on or under the skin. They may look like bruises but they don't go away. They are usually painless and harder than the skin around them.
 - Unexpected weight loss of greater than 10 lbs in less than two months
 Unexplained fever that has persisted for more
 - Unexplained fever that has persisted for mor than a week.
 Night sweats: several weeks of waking up
 - drenched or sweaty.

 Cough which is persistent and often dry, that is

not from smoking and has lasted too long to be

- from the flu.

 Diarrhea which is persistent and not explained by other causes.
 - Persistent white spots in the mouth (Thrush).

What can you do to help if you are in a high exposure group for AIDS?

In order to protect the recipients of blood, we ask you not to give blood if you have symptoms which occur in patients with AIDS or are in one of the above groups considered high risk of exposure to AIDS.

Temporary reasons for not being able to give blood:

Condition	Length of time before you can give	
Not feeling well for any reason	Until symptoms are over	
Cold. sore throat, cough.	Until symptoms are over	

Cold, sore throat, cough, respiratory infection
 Difficulty breathing
 Until symptoms are over

Antibiotics (except for acne 2 days after treatment is over or Flagyl for vaginal or unethra infections)
 Ears, nose or skin pierced, sterile conditions

acupuncture sterile conditions

Tattoos 12 months after procedure

Reload Transfusion 12 months after receiving

Blood Transfusion 12 months after receiving blood
 Full-term pregnancy 6 weeks after delivery

Surgery

surgery

chlamydia, genital herpes, syphilis, gonorrhea

· Coronary artery bypass

and full activity has been resumed after uncomplicated surgery, or fracture

 Sexually transmitted disease venereal disease, and treatment

6 months if certain conditions are met.

When healing is completed

С	ondi	tion	Length of time before you can give		
•	Mea enpo	sles, mumps, chick- ox	3 weeks from day of expo- sure (can give blood if vaccinated or had disease in past)		
•	Lym	e disease	6 months after date of last symptom		
•	Tube	erculosis (TB)	2 years after completion of treatment		
•	Accı	utane or Proscar	1 month after taking last dose		
•	liste	sex with anyone d in the first five gories in the perma- reasons list	12 months after last ind- dent		
•	fema	sex with male or ale prostitute within 12 months	12 months after last ind- dent		
	Permanent reasons for not being able to give blood:				
		Have used intravenous drugs (illegal IV drugs) even once			
	Are a man who has had sex with another man since 1977, even once				
	Are a hemophiliac				
	Have ever had a positive antibody test for				

Are a man or woman who has had sex for

Have had hepatitis any time after your 11th

Have had babesiosis or Chagas disease Have lived in or spent more than 5 years in

Europe between 1980 and 1996 In addition, federal guidelines may exclude people who have gone to or come from other countries outside of the United

HIV (AIDS Virus)

birthday

States.

money or drugs since 1977

DONATION PLEDGE CARD

Please Print Clearly

YES! I will give blood:				
First Name	Middle	Last		
Street Address				
City	State	Zip	_	
Home Phone		Business Phone	e	
I prefer to donate on:				
		_ time:	_	

We will test your blood to determine your ABO group and whether you are Rh positive or negative. Ablood donor card with your blood type will be sent to you. Please bring this card with you when you come to conate blood again. Thank you!