Thank you very much for giving blood

Blood, a possible channel for the transmission of infectious diseases

Blood can be a vehicle for the transmission of pathogens (bacteria, viruses and parasites) responsible for many diseases such as hepatitis, AIDS, Chagas' disease and syphilis.

To prevent transmission, blood banks perform very sensitive analyses for detecting pathogens. They are, however, not always detected in these tests. It is therefore VERY IMPORTANT for people who may be carriers of any of these pathogens NOT TO GIVE BLOOD.

YOU MUST NOT DONATE BLOOD if:

- You are or believe you may be a carrier of the human immunodeficiency virus (HIV) or AIDS virus.
- You are or believe you may be a carrier of any hepatitis virus (B or C).
- You have injected drugs (heroin, bodybuilding hormones, etc.) at any time in your life, even if was only once and a long time ago.
- You have ever accepted money, drugs or any other type of payment in exchange for sexual intercourse.
- You have had sexual relations in the last 4 months with: one or more casual partners, different partners, someone who changes partners frequently, someone who has injected intravenous drugs, someone who works or has worked as a prostitute.
- You have had sexual relations in the last year with someone who has the AIDS virus (HIV) or the HTLV-I, II virus.

Giving blood is not an appropriate method with which to determine your state of health or to have a blood test done. If that is what you require, you should:

- Consult your family doctor.
- Call the AIDS information helpline: 900 212 222

BLOOD DONATION AND BIOBANK

I hereby give my consent to:

1. Having blood taken from me for treating the sick.
2. In the event of not being possible to use this for said purpose, the blood and/or its components being kept anonymously at the Biobank recognised by the Banc de Sang i Teixits (Blood and Tissue Bank), for these to be applied in authorised biomedical research work intended for the progress of knowledge on the prevention, diagnosis, prognosis and/or treatment of diseases, as well as for improving biomedical control systems.
3. In exceptional circumstances, if they are not used for the above purposes, the blood and/or its components may be used for teaching work and/or for preparing diagnosis and therapy items, by the Banc de Sang i Teixits or other organisations or bodies.

I hereby declare that:

1. I have received understandable complementary information about:
   - The nature of blood and its components, the mechanisms of donation and the benefits stemming from it.
   - The reasons justifying the need to be examined, the causes for exclusion and rejection of the blood obtained and the importance of consent.
   - The possibility of suspending or excluding the donation at any time, and of revoking consent to keep the product or apply this to research work, where applicable.
   - The commitment that the traceability of the donation will be guaranteed and that I will be given any information obtained from the analyses that might be important for my health.
   - The importance of my informing of any illness after the donation which might affect the use of the blood.
2. I have understood the information and any questions that I might have asked have been satisfactorily answered.
3. Everything I have declared in the questionnaire filled in by me is true and correct.
4. I am aware that giving blood is a voluntary and altruistic act and that I will consequently not be given any compensation, either economic or of any other kind, nor in the event of the research authorised with the product of the donation possibly generating any profit.

PROCESSING OF PERSONAL DATA

I agree that:

1. The Blood and Tissue Bank (BST) may use my personal data to send me the information that it deems of interest with regard to the donation of blood.
2. The BST may provide solely my essential data to organisations that undertake to send emails, mailings, text messages or make calls with the sole purpose of informing me or inviting me to donation campaigns. These third parties agree to respect the BST policy of confidentiality and of protection of the interested parties' personal data.

I declare that:

1. I have been informed, in accordance with the law, that my personal data will be incorporated, as required, on the Register of Blood Donors of Catalunya, which is managed by the BST and for which the Directorate-General for Health Planning and Regulation of the Catalan Ministry of Health is responsible, to the necessary end of properly managing the process of donation and of applying blood-derived components.
2. I have been guaranteed that the data will be kept confidentially and subject to strict security measures, without prejudice to the exceptions established by law.
3. I understand that, whenever I wish I may contact the data controller (BST, p. Taulat, 116, 08005 Barcelona. Tel. 93 557 35 00) in order to exercise my rights of access, rectification, cancellation, opposition, erasure, restriction of treatment and portability of the data, in accordance with the terms established in applicable legislation.

You may consult the data protection policy at bancsang.net or request it at donation sites.
Recommendations after having given blood

Do not remove the plaster for at least 2 hours.

Do not do strenuous physical exercise for 24 hours particularly with the arm from which blood was taken.

Do not drink alcohol or smoke for 2 hours.

Drink plenty of liquid in the subsequent 24–48 hours.

Avoid very hot places. Well-ventilated, cool zones are better.

We also recommend that you should:

- Resume normal activity as soon as possible. Walk rather than sit still in a chair.
- Include salty ingredients in your diet for 24-48 hours.
- If the injection site bleeds when you remove the plaster, press the wound for 3-5 minutes.

If you feel faint at all:

- Lie down and ask people around you for help.
- Do not try to remain upright.
- Once lying down, raise your legs to stimulate circulation.
- Cross your ankles and every 5 seconds contract and relax the muscles in your legs and backside.
- The feeling of faintness will soon disappear.

If you have to do a blood test in the coming days, tell the doctor that you have given blood so he or she may interpret the results of your test properly.

Help us prevent transfusion problems

If in the days after donating you suffer from fever, malaise or a severe health problem, please get in touch with the Banc de Sang.

If you should feel any discomfort or would like to offer us any suggestions, please contact any of our permanent donation centres or our Donor Service Centre (93 557 35 66) or write to us at atencioaidonant@bst.cat

For further information:

93 557 35 66
donarsang.gencat.cat
Please write in capital letters

Name
Surname(s)
Date of birth
National ID No.
Address
Postcode
Town
email
Sex ☐ Male ☐ Female
Preferred language ☐ Catalan ☐ Spanish

Basic conditions for donation

Are you 18 years of age or over and weigh at least 50 kilos? ☐ ☐
Are you in good health? ☐ ☐
If you are a woman, are you pregnant or have you been so in the past 6 months? ☐ ☐

Country of birth
Of the donor ____________________________
Of the mother ____________________________
Date of last trip to your country of birth ______________

Please complete the questionnaire on the back before signing

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Donor’s name and surname(s) ____________________________
Signed ____________________________

To be completed by the interviewer

Donor number ____________________________
Date of blood draw ____________________________
Collection code Donation type ____________________________
Weight Hb BP ____________________________
Pulse Bag type ____________________________
CIP (CatSalut code card) ____________________________
Nurse in charge ____________________________
Observations ____________________________

I consider the donor is:
☐ NOT SUITABLE for donation (the donor has understood the reasons)
☐ SUITABLE with UNIVERSAL blood test
☐ CHAGAS test
☐ WNV test

Name and surname(s) of the interviewer ____________________________
Signed ____________________________
### Understanding of the informative brochure

Has the Blood Bank issued you with understandable written information on blood donation?  
*(If you require clarification, please ask the attending professionals any question that you feel is relevant)*

### Proceed with caution in the next 12 hours

Do you have to perform any dangerous work or sports activity (deep sea diving, climbing, etc.) or drive a public transport vehicle?  

### Are you on a waiting list?

Are you currently on a waiting list for a medical appointment or examination?  

### Medication

Are you taking or have you taken any pharmaceutical drug in the last few days?  

Have you ever taken medication for a prostate problem or alopecia (Finasteride, Avodart, Proscar, Propecia, Finasteride, Eucoprost or Avitol)?  

Have you ever taken medication for acne? (Neotigason, Rocutans, Tigason or Isotrex)

### In the past 2 weeks

Have you suffered from fever with a headache and generally felt unwell?  

Have you been to the dentist?  

### In the past month

Have you been in contact with anyone with a contagious infectious disease?  

Have you travelled outside Catalonia?  

Where? (Provinces of Spain or country)  

### In the past 2 months

Have you been vaccinated for anything?  

### In the past 4 months

Have you visited a doctor or have you been admitted to hospital?  

Have you had an endoscopy: colonoscopy, gastroscopy, rectoscopy or similar procedure?  

Have you been treated with acupuncture or have you had a piercing made with non-disposable material?  

Have you had a tattoo?  

Have you come into contact with another person’s blood as a result of an accidental jab or spattering?  

Have you been living or had close contact with anyone with hepatitis, jaundice or who is a hepatitis virus carrier?  

Have you had a surgical operation?  

### In the past 6 months

Have you travelled outside Spain?  

Where?  

### At any time in your life

Have you lived outside Spain?  

Where?  

Have you ever travelled to America?  

Which part?  

Have you spent over a year —counting all stays— in the United Kingdom (England, Wales, Scotland, Northern Ireland, Channel Islands, Isle of Man) in the period from 1980 to 1996?  

Have you been refused as a donor?  

Have you had a serious disease that required periodic medical supervision?  

Have you had hepatitis, jaundice or liver problems?  

Have you suffered from any serious infectious disease such as malaria, Chagas disease, leishmaniasis, infectious mononucleosis, tuberculosis, syphilis or gonorrhoea?  

Have you had any serious disease affecting the lungs, brain, kidneys, thyroid, digestive system or any other area?  

Have you had heart or blood pressure problems?  

Have you suffered from repeated epileptic seizures, convulsions, fainting or passing out?  

Do you suffer from insulin-dependent diabetes?  

Have you had cancer of any kind?  

Have you had any serious allergy-related disease or reaction?  

Have you had any haemorrhagic problem or any blood disease such as anaemia or an elevated red blood cell count?  

Have you ever received a blood or a clotting factor transfusion?  

Were you treated with human growth hormone (prior to 1987)?  

Have you received any organ or tissue transplant (dura mater, cornea, other, etc.)?  

Have you or any of your family suffered from spongiform encephalopathy (Creutzfeldt-Jakob disease)?  

Have you had or are you infected with the human T-lymphotropic virus (HTLV-I/II)?  

### Covid-19

Have you suffered from Covid-19?  

When did the symptoms end?  

Have you been re-infected?  

When did the symptoms of the 2nd infection end?  

Have you been vaccinated against Covid-19?  

Vaccination laboratory  

Date of vaccination (1st dose)  

Date of vaccination (2nd dose)