



# Journey of Donor during Blood Donation

## Registration

Present Valid
 Identification Card (or
 IQAMA, Driver's License,
 Passport, Family ID)



- Medical history
   questionnaire will be handed to the donor
   to fill out and to include his/her signature as
   consent (Affix ISBT Barcodes).
- Queuing number will be given to the donor.
- The Donor should notify the registration if the donation will be Voluntary or for specific patient donation.
- A brochure will be given to the donor for Pre-Health Education benefits of Blood donation.

## **Education**

 Ensure that the donor had met blood donation criteria (Age, Weight, V/S, Hours of sleep, meals, medication taken, did not visit malaria endemic area).



- A blood donation, Hepatitis & HIV brochures will be handed to the donor by the registration.
- Blood donation withdrawal well be explained at Assessment Area.

- A complete health education session will be conducted before donating.
- Platelet apheresis instruction will be conducted before donation.
- Post donation instruction.
- Health Education will be documented in Nursing Flow sheet and acknowledged by the donor.

#### Assessment

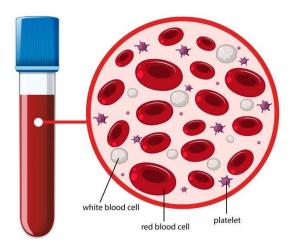
- Assessment nurse will call the donor with the corresponding queuing number.
- Identify donor by stating their three names and ID number.

- A confidential review of Donor Medical History and Questionnaire (DMHQ) is conducted to determine the eligibility.
- Determine height, weight, blood pressure, temperature and pulse with acceptable range.



- For temporary deferral, donor can come back after a certain duration.
- In case of permanent deferral, the blood bank physician will explain to the donor the reason.
- Check for suitable vein.

- Hemoglobin determination using HemoCue machine with acceptable range.
- For platelet donors, a 2-3 ml sample of blood will be extracted for CBC before commencing the procedure.



- Acceptable hematocrit range is from 35-50
  % and platelet count is 150,000 450,
  000/mcl.
- Re-check for suitable vein.

- Explain the procedure incorporating health education.
- Secure Consent.
- Affix confidentiality unit sticker in the DMHQ.
- Endorse donor to collection area.

### Collection

- Introduce yourself to donor.
- Check and review the DMHQ that have been completed.
- Confirm donor identity to verbalize their three names.
- Place comfortably on the phlebotomy chair.

- Provide privacy and maintain a safe and therapeutic environment.
- Prepare the blood bags. Check for any defects, discoloration and check expiration date.
- Affix barcodes from the DMHQ to the blood bags.
- Inspect arm for suitable vein after hand hygiene.
- Prepare the venipuncture site aseptically.
- Sterile disposable dressing set will be used to venipuncture procedure.
- Connect the blood bag to blood shaker.
- Blood donation is about
  5-10 minutes.

- Blood shaker will determine the volume of blood to be collected.
- Blood samples are taken for serology testing for malaria and ABO.
- Observe for any adverse reaction during donation. Nursing Intervention will be applied for mild & moderate adverse reaction.
- For severe reaction, blood bank physician will be called; nursing intervention will be applied and will follow physician's further instruction.
- If donor developed adverse reaction,
  procedure will be stopped.
- 420ml of blood product will be collected as per blood shakers' configuration.

- Under bleed will be collected and be sent to component area.
- Release tourniquet and withdraw the needle and apply pressure with a sterile cotton ball.
- Blood bags will be sealed after completing donation procedure, weigh blood product and send to component area.
- Assess donation site, if no bleeding, cover with sterile cotton balls and apply Adhesive dressing.
- Comply with KFMC infection control policy.



# Discharge

- Check post donation vital signs, record, and document in nursing flow sheet.
- Complete the DMHQ and encode in the Hematos System or MED-INFO Donor Data Encoding.
- Give post donation health education.
  - Whole blood, comes back after two months (4 weeks).
  - Platelet apheresis, come back after 2
    weeks.
- Re-assess the donor's stability before discharge.
- Donor will not leave the unit until released by the blood bank staff member.

