Dear Parent/Guardian,

Your 16-year-old has expressed interest in donating blood. Blood donors must be in good health, at least 16 years old, weigh at least 110 pounds, and have a picture ID. Donors will have to answer a series of very personal questions about their sexual activity, use of drugs, medications that they are taking, travel outside the US, and questions that promote a safe donation and safe blood for the patient. Our blood center is a 501(c)3 not-for-profit organization that provides blood products to hospitals and patients in need.

Blood donation is a safe procedure using single-use sterile supplies. In whole blood donations, the blood is directly collected into a bag. In automated collections called apheresis, the blood goes into a machine that separates blood into needed components and returns what is not needed to the donor along with an anticoagulant and salt solution.

Reactions like fainting and bruising occur but are not frequent. More serious reactions and injuries, including brief seizure activity, nerve or artery injury from the needle, are uncommon. Apheresis side effects may include blood loss, air embolus, and tingling of the lips or limbs.

To prevent reactions during and after donation, your child should eat well, be well-rested, and drink extra fluids. We provide additional tips to prepare for blood donation at our high school donor web site, www.donatefeelgreat.org.

Donated blood is tested for infections that can be transmitted by transfusion. These include HIV (the virus that causes AIDS), hepatitis, syphilis, and others. Both you and your child will be notified if positive results are found and your child may be contacted for follow-up testing. Your child’s name may be entered in a registry of excluded donors in the event of a positive test result. All information and test results are confidential except where reporting to public health is required by law. Occasionally blood is tested using research tests being developed for blood donor screening. A separate explanation is provided when we are doing this kind of research.

The blood center may provide iron supplements to promote wellness for donors. Blood donation may impact iron levels, so taking an iron supplement or multi-vitamin that contains 18-38 mg of iron for 8 weeks can help replace the iron lost during blood donation. A healthcare provider should be consulted before taking supplements.

State law requires a written parental consent for all 16-year old donors for each blood donation. 16-year-olds cannot give blood without a signed parental consent form at each donation. Please complete the consent form provided at the bottom of this page. If you have any questions regarding your child’s decision, please contact Director, Donor Services by calling (800) 747-5401.

We hope that you support your child’s decision to donate blood. They are showing civic responsibility, maturity, and a sense of community pride by donating blood.

Thank you,

[Signature]

Dr. Yasuko Erickson
Chief Medical Officer

I have read and fully understand the information regarding blood donation.

I give permission/consent for _______________________________ (print child’s legal name) to donate whole blood or to donate blood products by apheresis.

I understand that both my child and I will be notified if my child receives a positive test result(s) and that my child may be contacted for follow-up testing. Personal contact information will be kept confidential and used by the blood center, volunteers or partner organizations obligated under organizational confidentiality policies working on behalf of the Blood Center for future contact. Contact may be made using phone numbers, including cellular phone numbers, email, and mailing address to follow up post donation, for eligibility and notification for future donations, blood center programs and events.

Signature of Parent/Guardian _______________________________ Date ________________

I give permission/consent for _______________________________ (print child’s legal name) to donate whole blood or to donate blood products by apheresis.

I understand that both my child and I will be notified if my child receives a positive test result(s) and that my child may be contacted for follow-up testing. Personal contact information will be kept confidential and used by the blood center, volunteers or partner organizations obligated under organizational confidentiality policies working on behalf of the Blood Center for future contact. Contact may be made using phone numbers, including cellular phone numbers, email, and mailing address to follow up post donation, for eligibility and notification for future donations, blood center programs and events.

Signature of Parent/Guardian _______________________________ Date ________________

Parent/Guardian (print) _______________________________ Phone (___) __________

Mississippi Valley Regional Blood Center | Central Illinois Community Blood Center | Community Blood Services of Illinois
Every blood donor has their red blood cell level checked at donation to be sure they are not anemic and it is safe to give blood. The test we do is called “hemoglobin”. Many donors think that we are testing their iron levels, but hemoglobin is a poor measure of iron. Recent studies tell us that some teen donors have low iron but a normal hemoglobin level. No serious medical problem is recognized from low iron with normal hemoglobin, but we are considering whether to change the amount of blood teens can donate and/or giving them iron to replace what is lost with blood donation to keep them from developing low iron.

The standard (“old”) iron test result is only available days after a donation. We are comparing the old with a new test to see if we can do the new one at the time of donation and know the iron level more quickly. The old test is the “ferritin” level measured in a remote lab after donation with a large chemistry analyzer. The new test is called “point-of-care” (POC) ferritin. It is done in a few minutes at the blood drive with results available immediately after the donation, before the donor leaves. The POC test uses the same finger stick as the hemoglobin level. It has not been studied for its accuracy to measure iron in donors or its suitability for use at busy mobile blood drives. If the POC ferritin is accurate, we will be able to respond to donor iron levels at the blood drive instead of having to find and counsel donors afterwards. This will make the process more effective for our donors and efficient for the blood center.

If you do not want your teen to participate you need to check the “opt-out” box below. If you do not check that box, we will do both tests. If the iron results are abnormal enough that a doctor visit is needed, we will send a letter within the month with the information.

There are no new risks to donors from this study. No extra blood sample is needed. The benefit is that if we find iron levels unexpectedly low or high, they can be dealt with easily. Future blood donors will benefit if we find the POC test performs well and can be used in the donor room to counsel donors.

When testing is complete, results will be entered into a computer program without any information that can identify your teen, and analyzed for the study. No one except Dr. Katz and the study coordinator will have access your identity. If your teen participates, and you change your mind later, you can ask that the testing not be completed and that any data we have already gotten be discarded. A decision to be in this study or not, will not affect your teens ability to donate blood in the future as long they meet the other qualifications to be a blood donor.

If you have questions about this study, you may contact Dr. Katz or the study coordinator at 800-747-5401 and they will be answered. Tell the operator you are calling about the iron study.

☐ Check this box if you DO NOT want us to test your teen for ferritin using the experimental test.

Print name of Parent________________________________Signature___________________________________

Name of teen donor________________________________ Date ___/___/___