



YOUR SON/DAUGHTER WILL BE ASKED TO READ AND SIGN THE FOLLOWING DONOR CONSENT FORM ON THE DAY OF DONATION:

Phlebotomy is the process of withdrawing blood from a vein. I am voluntarily consenting to the phlebotomy procedure for the donation of blood. I have had the opportunity to refuse the phlebotomy procedure and understand I may discontinue the procedure at any time. I certify I have truthfully answered all questions regarding my present and prior illnesses, symptoms and physical conditions. I understand by not disclosing all pertinent information, I could put myself at risk for complications or place others, who may receive my blood, at risk as a result of this donation.

I understand I SHOULD NOT DONATE blood if I am at risk for HIV/AIDS or hepatitis (refer to "Blood Donor Educational Material"). If I think I am at risk for spreading the virus known to cause AIDS or other infectious diseases, I agree not to donate blood or other blood products. I understand it is a misdemeanor under Texas law to donate blood knowing that I have tested positive for, or have been diagnosed as having AIDS. I agree to call the blood center if I feel there is a reason my blood should not be used for transfusion.

I understand my blood samples will be tested for HIV (the AIDS virus), hepatitis and other diseases. Some samples may be used for unlicensed tests, or used for quality control/research purposes. If test results indicate I should no longer donate, I will be permanently deferred (unable to donate blood). I understand a reasonable effort will be made to notify me of abnormal results, which may be reported to authorities, as required by law. If I am a minor, I understand any abnormal results will be sent to, and/or discussed with, my parent(s) and/or legal guardian(s).

I understand there are known COMPLICATIONS associated with donating blood. Although uncommon, complications may occur at the site where the needle was inserted and may extend beyond my arm and cause complications throughout my body. Localized complications include:

- Pain, Soreness, Vascular injury, Bruising, Redness, Tissue scarring, Swelling, Bleeding, Localized infections, Systemic complications may include: Systemic infections, lightheadedness and/or fainting, may result in injuries if I fall or if I am driving.



*Scan QR Code, visit **SouthTexasBlood.org** or call **210-731-5590** to make an appointment at any location or a mobile blood drive.*





PARENTAL INFORMED CONSENT FOR STUDENT DONATION

Complete the following consent ONLY if the student is 16 years old on the date of donation OR if requested by your school. Please print in blue or black ink only. Reproduce on white paper only.

Parent or Guardian:

I certify that I have read pages three and four and fully understand the consent and information provided. I have asked and had my questions answered regarding the donation of blood and / or blood components, and I have the legal authority to permit and consent to my son / daughter donating blood. I permit and give my consent to my son/daughter signing the above-described donor consent form and to donating his / her blood and / or blood components to South Texas Blood & Tissue. I give this consent freely, voluntarily and without reservation, with the understanding that if my son/daughter would like to donate blood, he / she will be required to complete a health history questionnaire and to go through a screening process and thereafter donate blood or blood components. I understand that I will be notified if my son / daughter experiences a severe reaction while donating blood and / or blood components that requires further medical care and treatment and I authorize the performance of such care for my son / daughter. I also understand that if I have questions regarding my son's / daughter's donation experience or test results, I can call South Texas Blood & Tissue Quality Assurance Department at 210-731-5555, (800-292-5534), ext. 2414. Finally, I understand that the school, school district and / or the owner of the property (collectively, the "Host Facility") where the blood drive is taking place is not involved in any way, other than to permit the use of its facilities, and therefore I hereby release, remise and fully discharge the Host Facility from any and all liability, claims, damages and / or causes of action arising out of, related to, or deriving from my son's / daughter's participation, either through donation or otherwise, in the South Texas Blood & Tissue blood drive.

MINOR'S FULL LEGAL NAME (PRINT)

DATE OF BIRTH

MAILING ADDRESS

CITY, STATE, ZIP

PARENT / GUARDIAN NAME (PRINT)

RELATIONSHIP TO MINOR (PRINT)

CONTACT NUMBER (FOR REACTIONS REQUIRING MEDICAL CARE)

PARENT / GUARDIAN SIGNATURE

DATE

I confirm that the consent given based on the above signature is that of my parent / legal guardian.

DONOR (MINOR) SIGNATURE

DATE

PLEASE BRING THIS PORTION TO THE BLOOD DRIVE.

Dear Parent or Guardian,

Every year your student's high school partners with South Texas Blood & Tissue to host blood drives. And when your teen becomes a blood donor, they are showing a great deal of civic responsibility, maturity, and pride in their community. We're asking you to please encourage your son or daughter to join in the lifesaving act of giving blood, and we invite you to join them in giving the gift of life.

Visit SouthTexasBlood.org if you and / or your student would like to make an appointment to give blood, find out when you or they last donated, and to look for upcoming blood drives.

GENERAL INFORMATION ABOUT BLOOD DONATION

South Texas Blood & Tissue determines the eligibility of all blood donors and blood donations based on a mini-physical examination (wellness check), confidential interview and infectious disease testing.

BLOOD DONOR ELIGIBILITY

The safety of both the donor and the patient who might receive the donor's blood is our most important consideration. Steps in the blood donation process include:

- Fulfilling basic donor requirements of:
 - Being at least 16 years of age on the day of the donation.
 - Weighing at least 120 pounds for 16-year-old donors, or 110 pounds for 17-year-olds and older, on the day of the donation.
 - Bringing a valid picture ID on the day of the donation. Acceptable forms include:
 - Driver's license.
 - Credit or bank card with photograph.
 - Current student identification card.
 - High school blood donors without identification from the above list may use a current high school yearbook picture.
- Wearing clothing with sleeves that can be raised above the elbow.
- Establishing donor eligibility in a confidential interview, which includes questions about the donor's medical history and activities that may have caused exposure to infectious agents such as the viruses that cause HIV/AIDS, hepatitis or malaria.
- Checking the donor's heart rate, temperature, blood pressure and hematocrit level (a measure of the percentage of red blood cells in the body).
- Using new, sterile and disposable equipment to draw approximately one pint of blood.
- If the donor qualifies for a double red cell or red cell/ plasma donation by automated technology, blood will be drawn into a sterile, disposable system and mixed with a small amount of anticoagulant. The system separates the different components of the blood, collects the red cells, or red cells and plasma, and returns the remaining blood along with sterile saline to the donor. An additional consent will be given to your teenager to sign.
- Testing for hepatitis B and C, Chagas, WNV, HIV, syphilis and other infectious diseases. This testing is normally completed within a few days of donation.

REACTIONS TO DONATING BLOOD

While the blood donation process is normally a pleasant experience, it is possible that short-term side effects may occur, such as dizziness, fainting, skin irritation or bruising. Although unlikely, it is possible for the following to occur: bruising around the vein, infection in the area or nerve damage during or after the donation. If automation is used, side effects of the anticoagulant may occur, such as muscle cramps, numbness, chills or a tingling sensation. If these side effects occur, calcium carbonate (e.g. TUMS® or equivalent) may be provided, which will diminish the effects. Very rarely, severe reactions can occur with complications. If your teenager experiences a severe reaction while donating blood that requires further medical care, you will be contacted at the phone number you list on the attached consent.

IRON AND BLOOD DONATION

Most of the iron in the body is contained in hemoglobin, which is part of red blood cells. Whole-blood donors lose between 200-250 milligrams of iron in a typical donation. The temporary drop in iron may have no effect, but the body needs iron to replace red blood cells. Donors can increase iron levels through a diet of iron-rich foods or by taking a daily multivitamin with at least 18 milligrams of iron for at least 60 days following a donation. For more information about iron, consult with a physician.

PREVENTING REACTIONS

We want your teenager's donation experience to be productive and enjoyable! Here are a few tips:

- Get a good night's rest before donating.
- Drink 8 glasses of noncaffeinated beverages (water, fruit juice) both 24 hours before and after donating.
- Eat a full meal within four hours before donating.
- Avoid strenuous physical activity (including after-school activities) on the day of donation.

PHONE NUMBERS

For questions regarding the donation experience or test results, call:
Donor Advocacy Department
210-731-5555 (800-292-5534), ext. 2243
or email donoreligibility@southtexasblood.org

For post-donation information regarding the safety of your donation, call:
Quality Assurance Department
210-731-5555 (800-292-5534), ext. 2414

FOR STB&T USE ONLY

Today's Date _____ Consent Received by (Staff ID)_____

Donor Last Name & First Initial (PRINT)_____

New Donor? ☐ Yes ☐ No Donor ID _____ or ☐ New Donor Registered Offline

Collection Location
☒

☐ SA Mobile ☐ VIC Mobile Location ID_____

☐ DP ☐ NE ☐ NB ☐ SE ☐ SHV ☐ WH ☐ BOE ☐ BLV ☐ VIC ☐ Other_____