Thank you for volunteering to become a plasma or platelet donor. This sheet is intended to inform you about the donation process and the potential benefits and risks. After reading this sheet, we will ask you to sign a consent form to undergo this procedure.

WHAT IS A PLASMA OR PLATELET DONATION?

Plasma or platelet donations are made using a process called Apheresis. Apheresis is the process of separating blood into its different components: Plasma, platelets, and red blood cells (RBCs). Blood from the donor is drawn into a machine, mixed with anticoagulant solution (citrate) to prevent it from clotting and is then separated in a separator (also known as a centrifuge).

Plasma or platelets are collected in a bag and the rest is returned to the donor. This cycle is repeated until the desired volume of plasma or platelets is collected. All needles, tubing and collection bags used are sterile, single use and disposable. A new collection kit is used for each donation process.

This process allows 2-4 times the usual volume of plasma and up to 12 times the usual number of platelets to be removed at a single donation when compared with a regular blood donation.

WHAT ARE THE BENEFITS?

1. Plasma and platelets are more easily replaced in the body after a donation than red blood cells. Thus plasma and platelet donors can donate a lot more often than blood donors.

2. In a plasma or platelet donation most of the donor's red blood cells are returned and hence chances of the donor becoming anaemic are a lot less.

3. Being able to collect a lot more plasma from one donation helps the blood service keep up with the ever increasing demands for lifesaving plasma products.

WHAT ARE THE POSSIBLE RISKS?

1. Plasma and platelet donations take longer than blood donations. Blood donations typically take 5-10 minutes once on the donor bed. Plasma donations take up to 60 minutes once on the donor bed, and platelet donations take up to 90-120 minutes once on the donor bed.

2. Some minor problems seen occasionally in blood donations may also occur with plasma and platelet donations. Many of these relate to the use of a needle and include pain, bruising, infection or damage to the nerves in the skin. Dizziness and fainting could possibly also occur. However, chances of any minor problems are no more than doing a blood donation.

3. Tingling in the fingers and around the mouth or nausea and vomiting can occur when the red blood cells are returned to the donor. This is due to the infusion of small amounts of citrate, which is very quickly metabolised and removed. It is generally overcome by having a calcium supplement which is given by the nurse or technician looking after you.

4. Citrate reactions occur more frequently in first-time donors compared to experienced donors. Severe citrate reactions are uncommon and these usually result in the procedure being stopped. When a procedure is stopped for this or any other reason and your red blood cells cannot be returned we will ask you not to donate for a month. Donors should increase their fluid intake before and after donation.

5. On rare occasions, donor red cells may be damaged during apheresis procedures, releasing haemoglobin (a protein found in the red blood cells that carries oxygen in your body and gives blood its red colour). This is called Haemolysis. Kinks or obstruction of tubing, incorrect installation of equipment, or other equipment failure most commonly causes this. Any red cells damaged will be processed by your kidneys and removed from your body. This may or may not be obvious and appear as pink/reddish urine the next day.

6. Rare risks include the possibility that air might be introduced into the donor's blood stream, but modern machines used for plasma and platelet donations include alarms to prevent this and donors are monitored very closely during the procedure. In one study of 19,000 donations there were no heart, lung or air complication.

IS THE DONATION TESTED IN THE USUAL WAY?

The usual tests performed on blood donations will be performed, including screening tests for HIV (the AIDS Virus), hepatitis B, hepatitis C, HTLV and syphilis.

Plasma and platelet donors have a number of other monitoring blood tests performed occasionally to ensure that the levels of proteins in their blood and their blood counts remain normal.

Donors will be informed about any significant abnormalities that might be found with these tests.

OTHER IMPORTANT INFORMATION

We will conduct a brief physical check-up before your first donation to ensure that there are no obvious problems with your health that might lead to difficulties during your plasma or platelet donation.

The products collected may be processed into blood components for patients; for teaching purposes or for other laboratory use such as the manufacture of reagents.

Apheresis donation is generally safe and straightforward. If you suffer any minor problems as a result of your donation that requires review by a registered healthcare professional (e.g. your GP) you may be eligible for compensation for medical expenses that you incur (for example initial GP fee, cost of pharmacy items). Please ask one of our team for further information if this applies to you. Your healthcare professional may refer you to the Accident Compensation Commission (ACC) if additional review or treatment is required.

If you have any concerns or questions about this procedure you may discuss them at any time with the nurse who will be carrying out the donation process, or with a medical officer.