

RWJUH Blood Services Clinical Academic Building 125 Paterson Street, Suite 4200 New Brunswick, NJ 08901

Phone: (732) 235-8100

ax: (732) 235-6683 or (732) 235-8040

Parent/Guardian Consent for Blood Donation

Your child has expressed an interest in donating blood. Parental permission is required for all students who wish to donate volunteer blood, regardless of age. Before signing this consent form please read all the information provided including "A Student's Guide to Blood Donation" as well as the information provided on Iron Deficiency. If you have questions about blood donation, please contact the RWJUH Blood Services at 732-235-8100.ext 221

Important Information about Donating Blood

Most donors have uneventful donations and do fine afterwards. Some donors may bruise, become lightheaded or dizzy during or after the donation, faint, or experience other injury. Young, first-time donors are more likely to experience reactions than other donors. RWJUH Blood Services staff is trained to recognize and treat complications resulting from blood donation.

Iron is needed to make new red blood cells to replace those you lose from donation. To make new red blood cells, your body either uses iron already stored in your body or iron that is in the food you eat. While eating a well-balanced diet is important for all donors, simply eating iron-rich foods *may not* replace all the iron lost from blood donation. Taking multivitamins with iron or iron supplements (recommended dose is a minimum of 18 mg of elemental iron daily) either prescribed or over the counter (from a drugstore) may help replace iron loss. Current recommendations range from one typical multivitamin with iron or elemental iron caplets for six weeks to three months. Iron supplements may be harmful for some people. Because, it can hide conditions associated with gastrointestinal blood loss. Consult with your physician or pharmacist to assist you in deciding what dose, type, and duration of iron supplement to choose. Donors with a history of hereditary hemochromatosis, familial polyposis or on various medications should check with their physician before taking iron supplements.

Every donation is tested for HIV, the virus that causes AIDS. It is also tested for hepatitis B, hepatitis C, and other infectious diseases. If any test result suggests that your son or daughter may have an infectious disease, they will be disqualified from donating blood in the future. The RWJUH Blood Services maintains the confidentiality of information we obtain about a donor, and will release a donor's confidential information to his or her parents only with the donor's consent. Occasionally, blood testing may involve the use of investigational tests or medical research.

□ I give permission for my son/daughter to donate blood.		
Parent/Guardian Printed Name	Parent/Guardian Signature	Date
Parent/Guardian Phone Number (I can be rea	ached at this phone number on the day of don	nation.)
Donor/Patient Printed Name	Birthdate	(MM/DD/YYYY)

By signing above, I understand that the blood collected from my child may be used for treatment of patients or biomedical research. I understand that my child's blood will be tested for HIV and other disease markers including testing for additional research or investigational testing. If they test positive for any of the screening tests performed, RWJUH Blood Services will notify my child and his/her name will be placed on confidential permanent deferral list. I understand that the results of the tests will be kept strictly confidential unless required to be reported to the State or Federal Government or by subpoena.

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