Blood donation
WHAT YOU NEED TO KNOW

GIVE BLOOD. GIVE LIFE.

Did you know?

Different transfused products are used depending on the patient’s condition

Collection techniques differ based on the type of donation

Whole blood
The blood is collected as is and separated into its various components in a laboratory. This type of donation is made at a blood clinic, in a mobile unit or in one of our GLOBULE Blood Drive Centers.

Apheresis
The blood is separated during collection by machines that collect only the required blood components (plasma, platelets, white blood cells or red blood cells) and returns the others to the donor. These types of donations are made in a GLOBULE Blood Donor Centre or a PLASMAIRE Plasma Donor Lounge.

What you need to know...

According to the product collected

| Product collected | Approximate collection duration | Internal between donations | Weight and height | Fluids are administered to the donor. | An anticoagulant is added to the blood.
<table>
<thead>
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</thead>
<tbody>
<tr>
<td>Whole blood</td>
<td>50 to 90 min</td>
<td>56 days</td>
<td>More than 50 kg/110 lb</td>
<td></td>
<td></td>
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<tr>
<td>Plasma</td>
<td>45 min</td>
<td>6 days</td>
<td>The volume collected must be less than 10% of the donor’s estimated blood volume based on height and weight.</td>
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<tr>
<td>Red Blood Cells</td>
<td>25 min</td>
<td>112 Days</td>
<td></td>
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<td></td>
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<tr>
<td>Platelets</td>
<td>75 min</td>
<td>14 Days</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>White Blood Cells</td>
<td>90 min</td>
<td>10 Days</td>
<td></td>
<td></td>
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<tr>
<td>Combined Donation</td>
<td>25 to 90 min</td>
<td>Various according to the products collected</td>
<td></td>
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</tbody>
</table>

Before donation

- Drink at least 500 ml of water or juice and make sure to eat well while avoiding fatty foods (e.g., cheese, fried foods, etc.).

Answer questions about:
- Health status;
- Risky behaviors related to communicable diseases.

Agree to have Héma-Québec check:
- Blood pressure and temperature;
- Hemoglobin levels;
- Hematocrit levels;
- Platelet levels;
- Protein levels;
- White blood cell levels.

Sign a consent to donation.

BEFORE DONATION

At any time, the donor may change his or her mind and decide not to donate.

To read before donating

Whole blood

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Apheresis

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Did you know?

- Blood transfusions are used for patients with severe hemorrhage.
- Immunodeficiency.
- Major burn victims.
- Blood disease.
- Chemotherapy.
- Infection.
- Surgery.
- Accident.
- Whole blood.
- Apheresis.
- Plasmapheresis.
- White blood cells.
- Red blood cells.
- Platelets.
- Plasma.
- Combined donation.

Fluids are administered to the donor.

- An anticoagulant is added to the blood.

At any time, the donor may change his or her mind and decide not to donate.

- Whole blood.
- Apheresis.

Did you know?

- GIVE BLOOD. GIVE LIFE.
- Different transfused products are used depending on the patient’s condition.
- Collection techniques differ based on the type of donation.
- Blood donation.

GIVE BLOOD. GIVE LIFE.
Tests conducted

Héma-Québec analyzes all the blood donations it collects to detect blood-borne diseases:
- hepatitis B and C
- human T-cell lymphotropic virus (HTLV) 1 and 2
- syphilis
- human immunodeficiency virus (HIV)
- West Nile virus (WNV) - this test is conducted systematically during the epidemiologic season, outside of this period, it is only performed if the donor has travelled outside of Canada in the past 56 days
- Chagas disease - this test will be conducted for donors if they, their mother and/or their maternal grandmother were born in a Latin-American country (including Mexico) or if they have spent 30 consecutive days or more in one

There may be situations in which these tests are not conducted (e.g., damaged sample). In this case, the blood donation is destroyed without further analysis.

In the event of an abnormal result:
- the donation is destroyed
- the donor is notified and his or her results are kept confidential, but are shared with Canadian Blood Services to determine the length of time during which he or she cannot donate
- the local Director of Public Health will be notified of a positive result in cases where the law requires it.

The donor must notify Héma-Québec immediately if he or she believes, for any reason whatsoever, that his or her blood should not be made from his or her donation.

Other tests conducted:
- blood groups (ABO, Rh and, if necessary, other blood groups)
- phylogenetic (CMV), as needed
- bacterial culture of platelets
- hemoglobin type, if applicable

1 These tests are not applied on the cases of plasma donations to be used for educational, research or statistical purposes, or to contact them.

Risky activities and screening tests

Sexual relations 1 or the sharing of needles or syringes can contribute to the spread of blood-borne viruses.

Despite the effectiveness of screening tests, there is a period during which, even if the donor tests well and tests negative for HIV and Hepatitis B and C, he or she may have recently been infected and may therefore transmit these viruses to a person receiving a product made from his or her donation.

The donor must notify Héma-Québec immediately if tests belie, for any reason whatsoever, that his/her blood should not be transfused to a patient.

A blood drive is not the proper place for a health exam or to be screened for HIV or Hepatitis B and C.

For all type of donations

Adverse reactions

Adverse reactions that can occur after blood donation:

After the donation

- Rest and drink 500 ml of water or juice.
- Keep the bandage on the puncture site for six hours.
- Avoid any intense physical activity for six to eight hours. Blood donation can affect the performance of intense physical activity for a few days, particularly in the case of a red blood cell donation.
- In case of weakness: sit down with head between the knees or lay down with legs elevated for a few minutes. Depending on the donor’s occupation or exercise practices, extra time may be needed before regular activities can be resumed (e.g., bus driver, heavy machinery operator, etc.).

A more likely scenario is the occurrence of one or more adverse reactions.

1 There is a risk of hemolysis during the procedure, although this is very low. If not treated, hemolysis can have serious, even fatal, consequences. For the donor’s protection, Héma-Québec’s staff ensures close monitoring to detect hemolysis. If need be, the procedure is stopped immediately.
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Risks of storage and screening tests

In the event of an abnormal result:
- the donation is destroyed
- the donor is notified and his or her results are kept confidential, but are shared with Canadian Blood Services to determine the length of time during which he or she cannot donate
- the local Director of Public Health will be notified of a positive result in cases where the law requires it.

The donor must notify Héma-Québec immediately if he or she believes, for any reason whatsoever, that his or her blood should not be made from his or her donation.

Other tests conducted:
- blood groups (ABO, Rh and, if necessary, other blood groups)
- phylogenetic (CMV), as needed
- bacterial culture of platelets
- hemoglobin type, if applicable

1 These tests are not applied in the case of plasma donations to be used to manufacture medications.

1 For more information, Héma-Québec offers hemoglobin or hematocrit levels, but not hemolysis results. Depending on the components collected, donating blood (including the collection of blood samples) may result in a loss of iron, and if not balanced properly, for your body to replace this loss. The donor should have a diet rich in iron to make up for this. For more information, please read the “Blood donation” document on Héma-Québec’s Web site.

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3 Cases of palpitations or pain sensations have been observed in the past with less sophisticated collection equipment. The modern collection equipment used by Héma-Québec prevents the risk of embolism.

ADVERSE REACTIONS 

SICKNESS AND SYMPTOMS 

FREQUENCY 

WHOLE BLOOD DONATION 

APHERESIS DONATION

Eschymosis (bruise) at the puncture site Occasional 

Pain or numbness in arm Usually short term Occasional 

Nausea, vomiting, fainting Occasional 

Fatigue the day after donation Occasional 

Inflammation of vein in the arm (superficial phlebitis) Pain, warmth, redness Very rare 

Reduced iron reserve (anemia) Abnormal taste of certain substances such as ice, fatigues, reduced stamina, memory and mood problems More likely to occur in frequent donors 

Deletion of red blood cells (hemolysis) Pre- or post-donation pain after the procedure Very rare 

Reaction to sodium citrate (anticoagulant) Nausea or tingling of the lips, face or fingertips Frequent (5% of donors) 

Pain or numbness of arm usually short term Occasional 

Pain or numbness in arm Usually short term Occasional 

Prick or needle-like pain in extremities Very rare 

Possession of a metallic taste Frequent (5% of donors) 

Chills Frequent 

Other Very rare 

1 In case of weakness: sit down with head between the knees or lay down with legs elevated for a few minutes. Depending on the donor’s occupation or exercise practices, extra time may be needed before regular activities can be resumed (e.g., bus driver, heavy machinery operator, etc.).