

FEEL GOOD. GIVE BLOOD.

BLOOD DRIVE DATE: _____

TO DONATE BLOOD, YOU MUST:

- ✓ **Be at least 16 years old.** (Signed parental permission required for all 16 year old and by some sponsor groups for donors who are 17 and older)
- ✓ **Weigh at least 125 lbs. if 16 or 17; 110 lbs. if 18 or older**
- ✓ **Eat a good meal AND drink plenty of fluids before & after donating.**
- ✓ **Get a good night's sleep before donating.**



Scan this QR code with your smart phone or visit obi.org/blood-donors/young-donor-tips/ for tips on having a successful donation experience.

PRESENT A PHOTO ID.



Detach ↘

YES, sign me up! Return this form with signed permission (on back) if required.

Name

Address

City/State/Zip

Phone

Date of Birth

Email Address

CLASS SCHEDULE

Period	Class/Instructor	Room No.
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____
7.	_____	_____

BLOOD DONORS MUST:

- **Be at least 16 years old.** (Signed parental permission required for all 16 year olds and by some sponsor groups for donors who are 17 and older)
- **Weigh at least 125 lbs. if 16 or 17 and 110 lbs. if 18 or older**
- **Eat a good meal AND drink plenty of fluids before & after donating.**
- **Get a good night's sleep before donating.**
- **Present a Photo ID.**

BLOOD DONATION INCLUDES:

Registration – A series of questions are asked including your name, address, phone number, etc.

Mini-Physical – A series of questions are asked regarding your health history. You will be asked to review donor educational materials. Your temperature, blood pressure, pulse and iron levels will be checked.

Blood Donation – You will be asked to recline in a donor chair. A phlebotomist will prepare your arm by cleansing it. A sterile, disposable one-use-only needle will be used to collect the blood.

- A whole blood donation is performed by using a sterile, disposable one-use-only needle that is attached to a blood bag. Whole blood donation usually only takes about 20 minutes to donate one unit (about a pint).
- Automated donations are performed by using special machines that allow blood to be collected and separated into components. The desired component is collected

and the remaining components are returned to the donor along with a saline solution to replace fluids. This process is performed using a disposable, one-use-only needle that is attached to a disposable, one-use-only kit that is inserted into the machine. No blood ever touches the machine. You will be asked to sign a separate consent form for this type of donation.

Post Donation – You are encouraged to relax in our refreshment area and enjoy some juice and snacks to replenish your body before resuming activities.

Preventing Reactions - During and after donating, most donors have a pleasant experience. Occasionally, a donor may experience dizziness, weakness, or even faint. Often, this can be prevented by eating and drinking before donating. The most common risk associated with blood donation is tenderness or slight bruising at the site where the needle was inserted. Our employees are trained to handle donor reactions. That care is given under the direction of a physician.

Donor Testing - Blood will be tested for certain characteristics, including whether the blood tests positive for Hepatitis B, Hepatitis C, HIV and Syphilis. Donors will be notified of confirmed positive test results by letter or telephone call. By state law, certain positive test results must be reported to local health departments, the Oklahoma State Health Department, the Texas State Health Department or the Arkansas State Health Department.

Parents: To discuss a concern after your student's donation or if you believe your student's blood may be harmful if given to a patient, please call 1-800-375-7654.

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PLEASE KEEP THIS INFORMATION

PARENT/GUARDIAN PERMISSION

Please encourage your student to take part in the selfless and life-saving act of donating blood. By allowing your child to become a blood donor, you are encouraging him or her to demonstrate great civic responsibility, maturity and a sense of community pride. **THE FOLLOWING CONSENT MUST BE COMPLETED AND RETURNED TO BLOOD CENTER STAFF ON THE DATE OF DONATION.**

Blood Institute Use
ONLY
Apply DIN Sticker

I, the parent or legal guardian of the individual listed below, hereby consent for my child to make a voluntary blood donation, either whole blood or automated. This consent acknowledges I have read the information provided and consent includes submission to all tests and procedures performed in connection with the blood donation process, including additional testing as directed by a blood center physician and medical care should he or she experience a donor reaction.

PRINT LEGIBLY IN BLUE OR BLACK INK

Donor's Printed Name

Date of Birth

School (if applicable)

Parent/Guardian Printed Name

Parent/Guardian Phone Number

Parent or Legal Guardian's Signature

Date