MASSACHUSETTS GENERAL HOSPITAL WHOLE BLOOD DONOR ELIGIBILITY GUIDELINES

Weight: At least 110 lbs (100 lbs if giving at the hospital) and Maximum 350 lbs
Age: 16 & older - 16 year olds need parental permission form. If over 65 and have not donated in the last 5 years, please call us.
Last Donation: At least 56 days ago (8 wks)
Oral Intake: Donors should eat normally and drink plenty of water before presenting to donate blood.

Medical Conditions	Can I Donate?
Acupuncture	Yes
Active allergies (no symptoms today)	Yes
AIDS, exposure to AIDS, positive HIV test	No
Angina	No
Arthritis	
Osteo	Yes
Rheumatoidal	Yes
Asthma (no symptoms w/in 48 hrs)	Yes
Blood Transfusion, more than 12 mos ago	Yes
Cancer: 1 year after last treatment	Yes
Cold (active)	No
Exposure to a cold but no symptoms, feel well	Yes
Diabetes	Yes
Dental work	Yes
Electrolysis	Yes
Epilepsy or seizures, not on medication, no episode w/in 3 mos.	Yes
Fainted once from giving blood	Yes
Fever	No
Flu	No
Gonorrhea (w/in last 12 mos)	No
Heart attack within last 12 months	No
Household contact/exposure to hepatitis more than 12 mos ago	Yes
High blood pressure controlled w/ medication	Yes
Malaria: Travel in malarial area more than 12 mos ago	Yes
Residence in malarial area more than 3 yrs ago	Yes
Lyme Disease 1 year after treatment	Yes
Tick bite – no diagnosis – 3 months after treatment	Yes

Medical Conditions	Can I Donate?
Mononucleosis, when recovered	Yes
Piercing ,if done with sterile equipment	Yes
Pregnant	No
Sutures/stitches still in	No
Tattoo more than 12 mos ago	Yes
Tooth extraction – no drainage	Yes
Traveled/lived in UK for a **total of 3 mos btw 1980 and 1996**	No
Traveled/lived in Europe for a **total of 5 years since 1980**	No
Tuberculosis, when recovered and off medication 1 yr	Yes

Medications	
Antibiotics, more than 24 hrs ago	Yes
for acne	Yes
Acutane for acne w/in 4 wks	No
Allergy pills	Yes
Aspirin/Advil	Yes
Birth control pills	Yes
IV street drugs	No
Proscar w/in 4 wks	No
Tegison for Psoriasis	No

Vaccines	
Chicken Pox Vaccine, more than 4 wks ago	Yes
Measles, Mumps, Polio (oral), , Yellow Fever more than 2 wks ago	Yes
Flu Vaccine	Yes
Rubella Vaccine, more than 4 wks ago	Yes
MMR Vaccine, more than 4 wks ago	Yes
Tetanus Vaccine, more than 3 wks ago	Yes

ALL DONORS MUST BRING A PHOTO ID WHEN DONATING **For answers to medical eligibility questions, call the Blood Donor Center at 617-726-8171**

Blood Transfusion Service, Massachusetts General Hospital, The General Hospital Corporation, Boston, MA 02114-2696 U.S.A.
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