Complementary Therapy

1. Applies to the Whole Blood and Components Donor Selection Guidelines

Please replace “Discretionary” and “Reason for Change” with the versions below.

Discretionary

a) If oral or topical complementary medicines only and reason for which treatment was given is acceptable, accept

b) For all other therapies (to include faecal microbota therapy):

1. Performed within the NHS
   If performed by NHS staff on NHS premises including GP surgeries, accept.

2. Performed outside of the NHS
   If performed by a Qualified Health Care Professional registered with the
   General Medical Council (GMC),
   Nursing and Midwifery Council (NMC),
   General Dental Council (GDC),
   The General Chiropractic Council (GCC),
   The General Optical Council (GOC),
   The General Osteopathic Council (GOsC),
   The Health and Care Professions Council (HCPC) (which regulates Physiotherapists, Arts therapists, Biomedical Scientists, Chiropodists/ Podiatrists, Clinical Scientists, Dieticians, Hearing aid Dispensers, Occupational Therapists, Operating Department Practitioners, Orthoptists, Paramedics, Pharmacists, Practitioner Psychologists, Prosthetists and Orthotists, Radiographers, Social Workers in England and Speech and Language Therapists), accept.

   If none of the above applies and, after four months, a validated test for hepatitis B core antibody is negative, accept.

Reason for change

Pharmacists have been added to the list of professions regulated by the Health and Care Professions Council.
Complementary Therapy

2. Applies to the Tissue Donor Selection Guidelines for Live Donors, Tissue Donor Selection Guidelines for Deceased Donors, Cord Blood Donor Selection Guidelines, and Bone Marrow and PBSC Donor Selection Guidelines

Please replace “Obligatory” and “Discretionary” with the versions below.

**Obligatory**

1. Must not donate if:
   a) The condition for which treatment was given is not acceptable.
   b) Less than four months from colonic irrigation or colonic hydrotherapy

2. Therapies involving penetration by needles:
   Must not donate if:
   Less than four months from completing treatment.

**Discretionary**

a) If oral or topical complementary medicines only and reason for which treatment was given is acceptable, accept

b) For all other therapies (to include faecal microbiota therapy):

1. **Performed within the NHS**
   If performed by a suitably qualified NHS healthcare professional on NHS premises, accept.

2. **Performed outside of the NHS**
   If performed by a Qualified Health Care Professional registered with the General Medical Council (GMC), Nursing and Midwifery Council (NMC), General Dental Council (GDC), The General Chiropractic Council (GCC), The General Optical Council (GOC), The General Osteopathic Council (GOsC), The Health and Care Professions Council (HCPC) (which regulates Arts therapists, Biomedical Scientists, Chiropodists/ Podiatrists, Clinical Scientists, Dieticians, Hearing aid Dispensers, Occupational Therapists, Operating Department Practitioners, Orthoptists, Paramedics, Pharmacists, Practitioner Psychologists, Physiotherapists, Prosthetists and Orthotists, Radiographers, Social Workers in England and Speech and Language Therapists), accept.

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