3.14: Physical examination of donors

3.14.1: General considerations

A detailed medical assessment procedure must be conducted on all donors, as referred to above, i.e. based on the JPAC *Donor Selection Guidelines*. Particular attention is required for the assessment of first-time or ‘returning’ donors. Returning donors are defined as those who – although formerly registered as a blood donor with one of the four national Blood Transfusion Services – have not been assessed for donation for 2 years or more.

Assessment of blood pressure is not recommended because the circumstances at blood collection sessions are not conducive to obtaining meaningful measurements. Routine measurement of blood pressure could also give the impression that Blood Establishments offer a general health screening service which might be construed as an inducement to donate.

Inspection of the donor: The donor should be in good health. Note should be taken of poor physique, debilitation, under-nutrition, plethora, jaundice, cyanosis, dyspnoea, intoxication and mental instability. When in doubt the donor should be deferred until further advice has been obtained from a designated clinical support officer.

Weight: The minimum weight for donation is 50 kg (7 stone 12 lb) or 70 kg for donors of double red cells by apheresis. Those who weigh less than 50 kg are more likely to suffer adverse reactions, in particular dizziness and fainting, after a standard donation. This is because the volume taken represents a greater proportion of their blood volume. It should be noted that donors who are obese but are towards the lower weight limit may not have a sufficient blood volume to ensure a safe donation. The estimated blood volume of women weighing less than 65 kg should be calculated and consideration given to ensuring that no more than 15% of this volume is donated by the donor at any one time.