

**16-Year-Old Permission Form**

**THIS CONSENT MUST BE COMPLETED AND PRESENTED ON THE DAY OF THE BLOOD DONATION.**

PLEASE PRINT THE FOLLOWING INFORMATION IN **BLACK OR BLUE PEN**

This is to certify that

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**DONOR NAME**

is 16 years old. I have read the information below and I give my permission for my child/ward to participate in the blood drive. This may include donating blood.

★PRINT PARENT/GUARDIAN NAME

HOME/CELL PHONE

★PARENT/GUARDIAN SIGNATURE

★DATE OF SIGNATURE

**Reminders**

- Eat well before your donation
- All donors must present required identification
- All first time donors must show proof of age

**Donation Process**

**To determine if your child is eligible to donate we will:**

- Ask questions about health, travel, sexual activity and medicines to determine risk for viruses and other disease.
- Take your child's blood pressure and temperature.
- Take a small blood sample via a finger stick to ensure your child is not anemic.

**If your child is eligible to donate, we will:**

- Cleanse the arm with an antiseptic.
- Use a new, sterile, disposable needle and set to collect the blood.

**Possible Donation Complications and Adverse Effects:**

Most donors tolerate giving blood well, but on occasion reactions and complications may occur. On average, a very small number of donors have a reaction or complication when they donate either a pint of whole blood or donate blood using our automated technology. Examples of reactions and complications which may occur when donating whole blood or donating using automated technology may include anxiety; feeling warm or cold; nausea or vomiting; and dizziness, fainting. Bruising, nerve injury, or infection may also occur at the needle site. Injuries from falls following dizziness or fainting occur on rare occasions. Some of these reactions and complications may occur more frequently with younger donors donating whole blood versus donating blood using automated technology. Donors using automated technology may experience tingling of the fingers and around the mouth that is caused by citrate, a substance used to keep blood from clotting in the machine. Infrequently, muscle spasms can also occur. Very rarely, a donor using automated technology may develop decreased calcium levels (hypocalcemia) or an irregular heart-beat from citrate. Our staff is trained to recognize and manage such reactions. Donating blood temporarily reduces the body's iron level. In most donors, this has no effect on their health. As many teens have lower iron reserves than adults, it is advised to replace the lost iron through a daily multivitamin with iron or iron supplement of about 18-36 mg for 56 days.

**What happens to the donation:**

To protect patients, the blood is tested for viruses and certain other infectious diseases. If the blood tests are positive, it will not be given to a patient. Your child will be notified about test results that may disqualify him or her from donating in the future.

★ required fields

From time to time, Rhode Island Blood Center (RIBC) may offer additional health-related screening tests to donors. Your child will be advised at the time of donation concerning the specific test(s) that may be performed and provided with the opportunity to decline the offer. The results of any additional health related screening tests will be provided. Some of the blood may be used for research studies or investigational test procedures which will be conducted in accordance with guidelines established by a committee for protection of human subjects. If the results from any study could affect your child's health, your child will be notified.

If your child responds to the optional question regarding racial or ethnic group, the blood may also be tested for the presence of a rare blood type. If a rare blood type is found based on the optional screening program, we will notify your child by mail.

**What happens to the test results:**

Your child may be asked to speak with one of RIBC's medical professionals if the blood tests are positive for certain viruses, and your child may also be asked to return for a follow-up visit and further testing. The names of donors whose blood tests positive are kept in confidential files. These files can be opened solely by authorized RIBC personnel. Rhode Island Blood Center will not release positive test results without your written consent unless required by law (e.g. to the Health Department, FDA, or by judicial process).

We will not notify your child if the test results are negative or if sample tubes do not provide enough blood to complete all laboratory tests.

RIBC protects the confidentiality of all its donors.

If you have any question about your child's donation, please call us during normal business hours.

**Providence: (401)-453-8307**

Some products used in blood collection contain natural latex rubber which may cause allergic reactions.

**Thank you for consenting for your child to donate blood.**