

Normal Blood Donor Application

Please return completed and signed application to TSRI NBDS, Mail Stop SCRC200
TSRI Normal Blood Donor Service operates week days between 06:30-9:30 AM

Name _____ Date of Birth _____ ☐ Male ☐ Female Blood Type _____
Address _____ City _____ State _____ Zip _____
Work Phone _____ Cell Phone _____ Email Address _____
Are you a TSRI/Scripps Employee? ☐ Yes ☐ No Dept/Mail Code _____ Referred by _____
List all medications taken regularly (including birth control, aspirin, etc.) _____

Have you had Hepatitis B Vaccine? ☐ Yes ☐ No Do you smoke? ☐ Yes ☐ No List any allergies _____
Height _____ Weight _____

It is **imperative** that you carefully review the list of high risk groups given below. We ask your cooperation in this regard to safeguard the health of the staff and researchers who will be handling your blood. **If you fall into ANY of these groups for any reason, please DO NOT complete or return this form.** High risk groups include those who have a history of:

Permanent Disqualifications

- | | |
|---|--|
| <ul style="list-style-type: none"> • Intravenous Drug use at any time. • AIDS (Acquired Immune Deficiency Syndrome) • Males who have had sexual contact with another male since 1977 • Transfusions of clotting factor VIII or IX since 1977 • Sexual contact with anyone in any of the above categories since 1977 • Kidney/Liver Disease • Tuberculosis/Brucellosis • Hepatitis B or Hepatitis C • Blood relative diagnosed with Creutzfeldt – Jakob disease | <ul style="list-style-type: none"> • Brain or spinal surgery • Strokes • Diabetes • Chronic anemia • Blood or bleeding disorders • Fainting/dizzy spells • Tegison medication • Hemochromatosis • Cancer (other than skin) • Heart problems/chest pain • Gastric Bypass Surgery |
|---|--|
- Any of the symptoms of AIDS: unexplained night sweats, fever, weight loss, diarrhea, swollen glands, Kaposi's sarcoma (purple spots), or unexplained white spots in the mouth

Disqualifications if in the last 3 years

- Had malaria, or emigrated from, or a previous resident of an area where malaria is prevalent

Disqualifications if in last 12 months

- Travel to an area where malaria is prevalent
- Having been in jail 72 hours or more
- Sexually transmitted diseases

Disqualifications if in last 6 months

- Surgery – after released from MD care
- Blood or plasma transfusion

Please notify NBDS if you are pregnant, nursing, have had dental work in the last 3 days or recently had immunization or vaccinations.

AFFIDAVIT

To the best of my knowledge, I do not belong to any of the high risk donor groups listed above, or have any other conditions that could compromise the study for which my blood will be used. I have answered the questions accurately. By signing below, I understand that my blood will be tested for Hepatitis B Surface Antigen, Hepatitis C antibody, HIV, anemia, and blood type.

Signature _____ Date _____

