

If you have been asked to attend a donor “work-up” it is because you have been selected as the best match for a particular patient, and a transplant using your cells is highly likely. The purpose of the work-up is to assess your medical status to protect your safety and the patient’s. The work-up is also an information session where you have the opportunity to discuss all aspects of the donation and transplant process with a medical practitioner. You are invited to have a family member or friend attend this session with you. The work-up must take place within 30 days of the actual donation to ensure your assessment is current.

You will need to complete a donor health questionnaire and discuss this with the doctor. Blood samples will be taken at work-up which will be tested for infectious diseases and other tests assessing your general well-being.

You will have a physical examination by the doctor. The physical examination may include the following:

- ◆ Chest x-ray
- ◆ ECG
- ◆ Assessment of the veins in your arms and whether they are easily accessible for a peripheral blood stem cell (PBSC) donation (PBSC only)
- ◆ Assessment for general anaesthetic risk (bone marrow collection only)
- ◆ If you are a female donor and of child bearing age you will be asked to have a pregnancy test.

If you are having a marrow collection, it may be necessary to collect a unit of your blood (approximately 450mL, just like a blood donation) which may be returned to you at the time of the bone marrow collection if it is required. This will normally

occur at a blood bank or hospital between the time of the work-up and the collection.

The information you are provided in the session with the donor coordinator and doctor is quite detailed and may include printed materials and DVDs. This will vary depending on type of donation you and the doctor decide is best for you. The following areas should be covered, where relevant, and you may choose to use this list as a checklist to ensure you understand each area.

- ◆ Time taken for donation and recovery
- ◆ The donation procedure and possible side effects
- ◆ The potential need for a bone marrow collection if insufficient cells are collected by PSBC (PBSC only)
- ◆ The possibility of and procedures for subsequent donations
- ◆ That you cannot donate if you are pregnant
- ◆ The policy of anonymity between donor and patient
- ◆ Your right to withdraw at any stage and the consequences for the patient
- ◆ Professional and general liability insurance cover
- ◆ Donor expenses
- ◆ Storage of samples and possible use for ethically-approved research

During the work-up you will be asked to sign a number of documents, including a consent to receive G-CSF injections (if relevant) and an intent to donate document. However, this is not your final consent (in compliance with legislation) and the final consent

will be managed by the hospital or facility where the collection occurs.

It may take a number of days before the doctor has formally declared you fit to donate and signed the final donor clearance forms but you will be in close contact with your donor centre coordinator between the work-up and the collection and kept informed of the next steps. It is important that you inform the donor coordinator if you become unwell (eg if you contract a cold or the flu during this time) so that appropriate steps can be taken.

Donor expenses

The main cost to you as a donor will be some of your time. This will include time to provide additional blood samples if they are needed, time to be assessed by the doctor and your time to actually donate your blood stem cells if you are chosen as the donor for a patient. The ABMDR will cover all medical and hospital expenses related to the blood stem cell donation. Incidental expenses associated with the donation such as travel to and from hospital and accommodation if necessary will be paid directly by or reimbursed by your donor centre. All your “out of pocket” will be reimbursed.

Leave from paid employment is a matter between you and your employer.

