



Blood Transfusion Service
55 Fruit Street, GRJ 216
Boston, Massachusetts 02114-2696

Blood Donor Parental Consent

Your child has expressed interest in donating blood. State law requires that we obtain parental consent from potential donors who are 16 years of age. Some local schools have requested that we also obtain parental permission for all donations collected on school property. Therefore, we are providing the following information to help you determine if you wish to provide consent for your son or daughter to donate either whole blood, double red cells, or platelets by apheresis.

Blood Donation is as safe for donors in their mid to late teenage years as it is for older donors. There is no increased risk because of their younger age.

The eligibility criteria used to determine donor safety are identical for young donors to those applied to all other volunteer donors, regardless of age.

All donors are tested for a series of infectious diseases including Hepatitis B, Hepatitis C and HIV/AIDS. In the remote event that your son/daughter has a positive test result, s/he will be notified according to federal guidelines which apply to all donors regardless of age. You will not be notified of these results unless your son/daughter provides written permission for you to be included in the notification process.

People in their mid to late teenage years have been donating blood routinely in other states for many years. They are no more likely to experience any of the side effects of donation than older donors.

Blood donation is critical to the ongoing welfare of our community.

Each blood donation can help save or improve the lives of up to four local patients.

Teaching our children about civic responsibility and community service through blood donation is a positive, pro-social action that hopefully will become a lifelong commitment.

There is no personal gain from blood donation, other than the mini-physical, screening blood tests, and the internal feeling of self-worth and fulfillment that come from knowing that our actions have helped save the life of another human being.

Your child will be asked to read and sign an additional informed consent at the time of donation.

If you have any questions or comments about blood donation or this process of parental consent, please call the MGH Blood Donor Center at (617) 726-8165.



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I have read and understand the information below and I _____
(Print Parent/Guardian Name)

give my consent for _____ to donate blood.
(Print Donor Name)

I understand that my son or daughter must present this consent form at the time of donation in order to be eligible to donate.

Parent/Guardian Signature _____ Date _____

Donor Signature _____ Donor Date of Birth _____

1. This consent form will remain in place until the child turns 17 years of age.
2. The child (donor) will go through a health history to determine their eligibility. This includes questions, blood pressure, pulse and hemoglobin (iron) test.
3. The child (donor) will be asked to read and sign an additional informed consent at the time of donation.
4. All donors are tested for a series of infectious diseases including Hepatitis B, Hepatitis C, and HIV/AIDS. In the remote event that the child (donor) has a positive test result, he/she will be notified directly according to federal guidelines which apply to all donors regardless of age.
5. In accordance with AABB recommendations, the donor may be offered iron supplements.