

# **New York** Blood Center

## MEDICAL CONDITIONS GUIDELINES

**NOTE:** These are recommended guidelines. Deviations from the Medical Conditions Guidelines can only be made by the Medical Director. This information is to be documented in Comments area of the Registration/Health History form and include the name of the individual giving approval.

Conditions not found in this guideline are to be approved prior to accepting or deferring a donor.

“Designee” denotes someone authorized to provide guidance for accepting or deferring a donor and includes NYBC Fellows and SDS representatives.

MEDICAL CONDITION	COMMENT
Abortion	Defer for 6 weeks from date of termination
Abscesses	Acceptable after condition is resolved and treatment is complete.
Acne	Accept if not taking a deferring medication
Acoustic Neuroma	Accept if benign (non-cancerous) If malignant (cancerous), acceptable if in remission for at least two years.
Acromegaly	Accept.
Actinomycosis	Acceptable after condition resolved and treatment complete.
Acupuncture	Accept only if underlying condition is not cause for deferral <b>and</b> if performed with single-use equipment and under aseptic conditions; otherwise defer 12 months.
Acute Tubular Necrosis	Accept if recovered and renal function normal.
Addison's Disease	Permanent deferral.
Adenomas	Accept.
Adrenal Disorders	Permanent deferral.
Adrenal Glands Absent	Permanent deferral.
Adrenal-Cortical Syndrome (Cushing's Syndrome)	Permanent deferral if not cured.
Agammaglobulinemia	Permanent deferral.
AIDS	Permanent deferral.
Alcoholic Cirrhosis	Permanent deferral.
Alcoholism	Defer if under the influence.
Allergies	Accept as long as donor has no sinus or respiratory infections.
Allergy Injections	One day deferral.
Alpha-1-Antitrypsin Deficiency	Accept if asymptomatic and not using replacement therapy.
Amoebic Dysentery	Accept after treatment is completed and parasite eliminated.
Amyotrophic Lateral Sclerosis (Lou Gehrig's Disease)	Permanent deferral.
Anemias	Accept if hemoglobin qualifies and specific cause of anemia does not disqualify donor. Underlying cause should be documented. ( <i>See specific entity. If condition not listed contact Medical Director.</i> )

MEDICAL CONDITION	COMMENT
Aneurysms	<p>Aortic aneurysm: If surgically corrected and asymptomatic defer for 6 months from date of surgery. If not surgically corrected written medical release and NYBC MD review is required.</p> <p>Cerebral aneurysm: Refer to medical director.</p> <p>If blood transfusion received, defer per criteria.</p>
Angina Pectoris	<p>Defer for 1 year if condition requires nitroglycerine preparations for maintenance. Refer to Medical Director for exception.</p> <p>If donor had cardiac surgery and angina is resolved, accept if:</p> <ol style="list-style-type: none"> <li>1. 6 months after surgery, AND</li> <li>2. donor is asymptomatic, AND</li> <li>3. donor has resumed normal activities</li> </ol>
Angioedema	Accept unless donor has a history of respiratory difficulty then the donor is a permanent deferral.
Angioplasty/Stenting (Coronary)	<p>Accept 6 months after procedure if:</p> <ol style="list-style-type: none"> <li>1) donor is asymptomatic,</li> <li>2) donor has no limitation of activities</li> </ol>
Animal Bites	Defer for 12 months a donor who has been bitten by an animal without documented rabies vaccine
Animal Needle Stick	Defer for 12 months a donor who has been exposed to an animal's blood (domestic or feral) through a needle stick.
Ankylosing Spondylitis	Accept if no limitation of motion (can sit in donor chairs).
Anthrax	<p>Confirmed diagnosis: Defer until the full course of treatment is complete.</p> <p>Confirmed test: Defer until treatment is complete.</p> <p>Confirmed exposure: Defer until treatment is complete or condition is resolved.</p>
Aortic Stenosis	<p>Accept 6 months after surgical repair if:</p> <ol style="list-style-type: none"> <li>1) donor is asymptomatic,</li> <li>2) donor has no limitation of activities</li> </ol>
Appendectomy	Accept if released from doctor's care, feels well, full activity has been resumed.
Arrhythmias <span style="border: 1px solid black; padding: 2px;">See MDC12-2</span>	<ol style="list-style-type: none"> <li>1. A donor with a history of arrhythmia may be accepted if:               <ol style="list-style-type: none"> <li>a. donor is asymptomatic,</li> <li>b. donor has no history of other cardiac problems.</li> </ol> </li> <li>2. A donor with a history of arrhythmia <u>on medication</u> may be accepted if:               <ol style="list-style-type: none"> <li>a. donor is asymptomatic,</li> <li>b. donor has no history of other cardiac problems.</li> <li>c. donor's physician provides written consent and/or NYBC physician gives medical clearance.</li> <li>d. donor is not taking any medication listed on the Medication Deferral List.</li> </ol> </li> </ol>
Arteriovenous (AV) Malformation	<p>If surgically corrected and asymptomatic defer for 6 months from date of surgery. If blood transfusion received, defer per criteria.</p> <p>If not surgically corrected written medical release and NYBC MD review is required.</p>
Arthritis	<p>Osteoarthritis - Accept.</p> <p>Rheumatoid arthritis – Accept unless in acute phase</p>
Asbestosis	If causing chronic lung disease, permanent deferral, otherwise accept.
Asthma	Accept if asymptomatic.

MEDICAL CONDITION	COMMENT
Atrial Fibrillation <span style="border: 1px solid black; padding: 2px;">See MDC12-2</span>	<ol style="list-style-type: none"> <li>1. A donor with a history of atrial fibrillation (arrhythmia) may be accepted if:               <ol style="list-style-type: none"> <li>a. donor is asymptomatic,</li> <li>b. donor has no history of other cardiac problems.</li> </ol> </li> <li>2. A donor with a history of atrial fibrillation (arrhythmia) <u>on medication</u> may be accepted if:               <ol style="list-style-type: none"> <li>a. donor is asymptomatic,</li> <li>b. donor has no history of other cardiac problems.</li> <li>c. donor's physician provides written consent and/or NYBC physician gives medical clearance.</li> <li>d. donor is not taking any medication listed on the Medication Deferral List.</li> </ol> </li> </ol>
Babesiosis	Permanent deferral.
BCG (Bacillus Calmette-Guerin)	Defer for 2 weeks after treatment with BCG
Bee Stings	One day deferral.
Bell's Palsy	Accept. (If related to Lyme Disease see entity.)
Benign Bladder Polyps	Accept. NOTE: If being treated with BCG, then defer two weeks.
Benign Prostatic Hypertrophy (BPH)	Accept if not taking finasteride, Proscar, Avodart, Jalyn or Propecia.
Bipolar Disease	Accept if mentally and legally responsible.
Bladder Disorder	<p>Benign bladder polyps: accept unless being treated with BCG then defer two weeks.</p> <p>Bladder cancer: acceptable if in remission for at least one year.</p> <p>Cystitis (bladder infection): acceptable after condition resolved and treatment complete</p>
Bleeding Disorders	<i>See specific entity. If not present, the Medical Director or designee is to evaluate.</i>
Blood Donation	<i>See "Interval Between Donation Dates".</i>
Blood Transfusion	Defer 12 months after last transfusion. <b>NOTE: Autologous platelet enriched plasma injection treatments - accept</b>
Body Piercing	Accept only if performed with single-use equipment and under aseptic conditions; otherwise defer 12 months.
Bone Disorders	<p>Accept unless condition is malignant or infectious.</p> <p>If malignant accept if in remission for at least one year.</p> <p>If infected, then follow criteria for osteomyelitis - accept two (2) years after confirmed cures.</p>
Bone Marrow Donor	Accept 8 weeks after donation unless there remain lingering complications
Brain Surgery	<p>Non-vascular: accept if recovered and seizure free in last one month.</p> <p>Vascular, bleeding: follow criteria for Cerebrovascular Accident (i.e., acceptable one year after the stroke and the donor is stable with or without deficits).</p> <p>Vascular, aneurysm: Refer to medical director.</p> <p>For malignancy (Cancer): accept only after in remission for at least one year.</p> <p>Dura mater (brain covering) transplant: permanent deferral.</p>
Branding	Skin branding: 12-month deferral.

MEDICAL CONDITION	COMMENT
Breastfeeding	Accept.
Brucellosis	Defer 2 years after diagnosis provided treatment is complete and there is no recurrence.
Buerger's Disease	Permanent deferral.
Bursitis	Accept if not infected and donor in no acute distress.
Cancer	<ol style="list-style-type: none"> <li>1. Skin cancer: Localized basal cell carcinoma or squamous cell carcinoma: acceptable if completely excised and healed.</li> <li>2. Carcinoma-in-situ (stage where cancer cells are still within their site of origin) of the vulva, cervix or breast; papillary thyroid carcinoma: acceptable after completion of therapy.</li> <li>3. Leukemia, lymphoma, Hodgkin's disease and multiple myeloma: permanent deferral.</li> <li>4. All other cancers, including melanoma, in remission for at least one year: acceptable.</li> </ol> <p><b>NOTE:</b> Tamoxifen and other medications used for breast cancer preventative treatment are acceptable provided the donor meets all other criteria for cancer.</p>
Candida Infection (Candidiasis)	Defer until resolved if systemic or involving mouth, esophagus, trachea, bronchi or lungs. If vaginal, accept.
Canker Sore	Accept if not chronic (never healing).
Cardiac Arrest	Accept if the donor is fully recovered without restrictions and <ol style="list-style-type: none"> <li>1. the arrest was not related to underlying heart disease,</li> <li>2. donor is asymptomatic,</li> </ol> If the arrest was due to underlying heart disease or the cause was unknown: If related to heart disease accept one year later if: <ol style="list-style-type: none"> <li>1. donor is asymptomatic, AND</li> <li>2. donor has no limitation of activities, AND</li> <li>3. donor's physician has given written approval regarding blood donation OR verbal approval by a NYBC MD, documented on the R/HH form.</li> </ol>
Cardiac Catheterization	Refer to Medical Director.
Cardiac Defects	Defer if symptomatic Accept if asymptomatic with no limitation activities If surgically corrected, accept after 6 months if asymptomatic with no limitation of activities.
Cardiomyopathy	NYBC MD review required
Cardiovascular Disease	<i>See specific entity.</i> If not listed, refer to Medical Director.
Carotid Bruit	Refer to medical director.
Carpal Tunnel Syndrome	Accept.
Casts	Accept only if there was a simple fracture/break. If there was any type of surgery, defer until the cast is removed and all wounds are completely healed.
Cat-Scratch Disease	Acceptable after condition resolved and treatment complete.
Cauterization	Accept.

MEDICAL CONDITION	COMMENT
Celiac Disease	Accept.
Central Nervous System Disorders	See <i>specific entity</i> , if not listed refer to Medical Director.
Cerebral Palsy	Accept if donor safety can be ensured during phlebotomy, otherwise Medical Director or designee evaluate.
Cerebrovascular Accident	Accept if: 1. one year after the stroke; 2. the donor is stable with or without deficits; If donor received anticoagulation therapy, defer for at least one month after treatment is complete.
Cervical Dysplasia	Accept
Chagas Disease	Permanent deferral.
Chancre	Defer until 12 months after completion of therapy. (Is a primary syphilitic lesion.)
Chemotherapy	See <i>Cancer</i> .
Chest Pain	Defer unless evaluated by doctor and not due to heart disease. If due to heart disease, see <i>angina pectoris</i> .
Chicken Pox	If not previously immunized ( <i>See also Immunizations and Vaccinations list</i> ) or infected, defer 21 days after exposure. Otherwise accept. Defer for active infection until 1 week after lesions resolved. If injected with VZIG (varicella immune globulin – ‘chicken pox vaccine’) post-exposure, defer 2 months.
Chlamydia (genital)	Accept after treatment is complete.
Chronic Bronchitis	Accept if symptom free and not on antibiotics.
Chronic Fatigue Syndrome (CFS; myalgic encephalomyelitis or ME)	If diagnosed by a physician - permanent deferral
Chronic Granulomatous Disease	Permanent deferral.
Chronic Lung Disease	Accept if donor is asymptomatic and not on antibiotics
Cirrhosis	Permanent deferral
Coagulation Factor	If received for condition other than congenital coagulation factor deficiency ( <i>see below</i> ) - defer 12 months from the time of infusion.
Coagulation Factor Deficiencies (Congenital)	Permanent deferral except for Factor XII (12) deficiency.
Coccidiomycosis	Permanent deferral if disseminated or extra pulmonary (outside the lungs). If pulmonary, defer for two years after diagnosis provided treatment is complete.
Cold Sores	Accept if dried and healing.
Colds	Defer for active symptoms of a cold, flu, or upper respiratory infection (URI, sore throat) until symptoms have subsided and have been symptom free for 3 days.
Colitis, Non-Specific	Accept if asymptomatic. Defer for 3 days after last episode of diarrhea.
Collagen Vascular Diseases	Accept if asymptomatic.
Condylomata Acuminata (Venereal Warts)	Accept

<b>MEDICAL CONDITION</b>	<b>COMMENT</b>
Congenital Heart Disease	Defer if symptomatic Accept if asymptomatic with no limitation activities If surgically corrected, accept after 6 month if asymptomatic with no limitation of activities.
Congestive Heart Failure	Accept with cardiologist clearance.
Conization of Cervix	Defer for 4 weeks after procedure.
Conjunctivitis	Defer until resolved and asymptomatic.
Convulsions	Acceptable as long as seizure-free in the past month. If due to cancer, acceptable if in remission for at least one year.
COPD (Chronic Obstructive Pulmonary Disease)	Accept if donor is asymptomatic and not on antibiotics.
Coronary Artery Bypass Surgery	Accept if: 1. 6 months after surgery, AND 2. donor is asymptomatic, AND 3. donor has resumed normal activities, If due to heart attack accept one year later if: 1. donor is asymptomatic, AND 2. donor has no limitation of activities, AND 3. donor's physician has given written approval regarding blood donation OR verbal approval by a NYBC MD, documented on the R/HH form.
Costochondritis	Accept.
Coxsackie Virus	Accept if recovered and no jaundice occurred.
CREST Syndrome	Accept if asymptomatic.
Creutzfeldt-Jacob Disease	Permanent deferral.
Crohn's Disease	Accept if asymptomatic and no diarrhea for 3 days.
Cryptococcosis	Accept if well and asymptomatic. Permanent deferral if extra pulmonary.
Cryptosporidiosis	Permanent deferral if chronic intestinal infection with diarrhea persisting longer than 1 month.
Cushing's Syndrome	Permanent deferral if not cured.
Cutaneous Larva Migrans	Accept after completion of therapy and feels well.
Cystic Fibrosis	Medical Director or designee to evaluate. Accept if no current infection. Defer if infected or being treated for an infection.
Cystitis	Acceptable after condition resolved and treatment complete.
Cysts	Medical Director to evaluate. For chronic pilonidal cyst, accept if meets all donor criteria, i.e., no fever and no medications (antibiotics).
Cytomegalovirus (CMV)	Acute infection: defer until resolved and no jaundice occurred. If jaundice occurred, permanent deferral. Accept if antibody positive (due to past infection or exposure) but symptom free.
Deep Vein Thrombosis (DVT)	Accept if condition resolved and at least one month after completion of anticoagulation therapy.

MEDICAL CONDITION	COMMENT
Dengue Fever	Defer for eight weeks after resolution of symptoms.
Dental Work/Surgery	Minor cleanings or fillings: accept. Root canal, oral surgery, or tooth extraction <i>with no signs or symptoms of infection</i> : defer 3 days. Dental Bone Matrix procedure acceptable (FDA approved, demineralized, sterilized osseous material used in rebuilding bone). <b>NOTE: Autologous platelet enriched plasma injection treatments-accept</b> If sutures are present defer until removed and wound healed.
Dermatitis	Defer only if lesions in area of venipuncture.
Dermatomyositis	Accept if asymptomatic.
Diabetes	Diabetes Mellitus (Type 1 / 2): Accept if on insulin (including insulin pump) and stable; donor must have eaten prior to donation. Accept if diet controlled and/or on oral hypoglycemics. Diabetes Insipidus: Acceptable.
Dialysis	Permanent deferral for chronic dialysis patient.
Diarrhea	Accept if symptom-free for 3 days.
Diverticular Disease	Accept if no active disease.
Down's Syndrome	Accept if mentally competent and understands procedure.
Dressler's Syndrome	This is a type of pericarditis. Accept after condition is resolved and donor asymptomatic. If occurring post-cardiac surgery, defer 6 months. If occurring post myocardial infarction accept one year later if: 1. donor is asymptomatic, AND 2. donor has no limitation of activities, AND 3. donor's physician has given written approval regarding blood donation OR verbal approval by a NYBC MD, documented on the R/HH form.
Dura Mater (brain covering) graft or transplant	Permanent deferral.
Ear Piercing	Accept only if performed with single-use equipment and under aseptic conditions; otherwise defer 12 months.
Ectopic Pregnancy	Defer 6 weeks after resolution.
Eczema	Accept if lesions not in area of venipuncture.
Ehlers Danlos Syndrome	Permanent deferral.
Ehrlichiosis	Accept if asymptomatic and treatment is complete. If signs or symptoms, defer for six months after completion of treatment.
Electrolysis	Accept only if performed with single-use equipment and under aseptic conditions; otherwise defer 12 months.

MEDICAL CONDITION	COMMENT
Embolism	<p>Pulmonary embolism: Accept if condition resolved, donor is asymptomatic and at least one month after completion of anticoagulation therapy.</p> <p>Brain embolism: Accept if:</p> <ol style="list-style-type: none"> <li>one year after the stroke;</li> <li>the donor is stable with or without deficits;</li> <li>anticoagulation therapy is complete for at least one month.</li> </ol> <p>Limb embolism: Accept if condition resolved, donor is asymptomatic and at least one month after completion of anticoagulation therapy.</p>
Emphysema	Accept if asymptomatic.
Encephalitis	Accept 4 (four) weeks after recovery.
Endocarditis	Accept after condition resolved and treatment complete. If taking prophylactic antibiotics, see Medical Director.
Endocrine Disorder	See <i>specific entity</i> ; if not listed obtain Medical Director's opinion.
Endometriosis	Accept.
Endometritis	Acceptable after condition resolved and treatment complete.
Epilepsy	Acceptable as long as seizure-free in the past month. If due to cancer, acceptable if in remission for at least one year.
Epistaxis (Nosebleed)	Accept if does not have bleeding disorder.
Epstein Barr Virus	Defer, until resolved and no jaundice occurred. Accept if antibody positive but symptom free.
Erythema Nodosum	Can accept if recovered and asymptomatic.
Esophagitis	Accept if asymptomatic and no underlying disease.
Factor V Leiden	Permanent deferral if had more than one thromboembolic episode. Anticoagulation therapy, if received, must be finished for at least one month.
Factor XI deficiency	Defer
Fainting	Defer if frequent and recurring.
Fever Blisters	Accept if not chronic (never healing). Accept if dried and healing.
Fibrocystic Disease Of Breast	Accept.
Fibroids	Accept.
Fibromyalgia	Accept.
Fibromyositis	Accept.
Fifth Disease	Defer 21 days after exposure.
Floppy Valve (mitral valve prolapse)	Accept if: <ol style="list-style-type: none"> <li>asymptomatic,</li> <li>no arrhythmias,</li> <li>no limitation of activities.</li> </ol>
Flu	Defer for active symptoms of a cold, flu, or upper respiratory infection (URI, sore throat) until symptoms have subsided and have been symptom free for 3 days.
Food Poisoning	Accept if asymptomatic for 3 days.

MEDICAL CONDITION	COMMENT
Fungal Infection	See specific entity. If systemic or deep tissues involved, defer 1 month after cessation of therapy and feels well. If superficial, away from venipuncture site - accept.
G6PD deficiency	Permanent deferral.
Gastritis	If acute - acceptable after condition resolved. If chronic – acceptable if not on antibiotics (for Helicobacter Pylori).
GERD	Acceptable (Gastric Esophageal Reflux Disorder)
Genital Herpes	Defer while active lesions present and for 1 week afterwards. Accept when lesions inactive.
Genital Warts	Accept.
GI Disorders	See specific entity; otherwise get Medical Director to evaluate.
Giardiasis	Accept after condition resolved and treatment complete.
Gilbert's Syndrome	Accept.
Gingivitis	Accept if donor is asymptomatic.
Glaucoma	Accept.
Glomerulonephritis	Permanent deferral if chronic renal disease. If condition resolved and kidney function normal - accept.
Gonorrhea	Defer 12 months after treatment completed.
Gout	Accept if controlled.
Granuloma Annulare	Accept as long as antecubital area not involved.
Granuloma Inguinale	Accept after treatment completed and lesions healed.
Grave's Disease	Accept once euthyroid (normal thyroid function) <b>NOTE:</b> Thyroid hormone replacement therapy acceptable.
Growth Hormone	Human derived growth hormone – permanent deferral. <b>NOTE:</b> The use of <b>human</b> derived pituitary growth hormone was discontinued by the FDA in 1985. Recombinant or synthetic growth hormone – acceptable.
Guillain-Barre Syndrome	Can accept if recovered and asymptomatic.
Hairy Cell Leukemia	Permanent deferral.
Hair Transplant	Accept only if performed with single-use equipment and under aseptic conditions; otherwise defer 12 months.
Hanson's Disease (Leprosy)	Permanent deferral.
Hashimoto's Disease	Accept after treatment of acute phase of disease is complete. Thyroid hormone replacement (thyroxine, Synthroid) acceptable.
Hay Fever	Accept as long as donor has no sinus or respiratory infection.
Head Injury	Accept if seizure free in past month. Medical Director to evaluate, if necessary.
Headache	Cluster, migraine, tension - defer until resolved and feels well.

MEDICAL CONDITION	COMMENT
Heart Attack	Accept one year later if: 1. donor is asymptomatic, AND 2. donor has no limitation of activities, AND 3. donor's physician has given written approval regarding blood donation OR verbal approval by a NYBC MD, documented on the R/HH form.
Heart Disease	See <i>specific entity</i> . If not listed, Medical Director to evaluate.
Heart Murmur	Accept if: 1. donor asymptomatic, 2. has no activity limitations 3. see also arrhythmias
Heart Surgery	May accept if: 1. has been six months since surgery, 2. has resumed normal activities and 3. is asymptomatic. If due to heart attack accept one year later if: 1. donor is asymptomatic, AND 2. donor has no limitation of activities, AND 3. donor's physician has given written approval regarding blood donation OR verbal approval by a NYBC MD, documented on the R/HH form.
Heartburn	Accept.
Helicobacter pylori	Accept if treatment is complete and off antibiotics.
Hematuria	Defer until evaluated by doctor then re-evaluate with diagnosis.
Hemochromatosis	Acceptable if donor meets criteria for donation. Follow Hereditary Hemochromatosis Phlebotomy Program if applicable.
Hemodialysis	Permanent deferral for chronic dialysis patients. Health care workers performing dialysis are acceptable if they meet criteria for donation.
Hemolytic Anemias	See <i>specific entity</i> . If not listed, Medical Director to evaluate.
Hemophilia	Permanent deferral.
Hemorrhoids	Acceptable. If post-operative, defer until healing is complete.
Hepatitis	Permanent deferral for a donor with a history of <u>any</u> viral hepatitis at age 11 or over (includes A, B, C and mononucleosis-associated hepatitis). Donors who have tested positive for Hepatitis B antibodies (anti-HBs) following immunization (e.g., HeptaVax), are acceptable. History of non-viral hepatitis caused by alcohol ingestion, drug sensitivity or toxin is acceptable provided donor meets all other criteria for donation.
Hereditary Spherocytosis	Permanent deferral.
Hernia	Accept.
Herniated Disc	Accept.
Herpes Simplex	Accept if dried and healing. Permanent deferral if chronic ulcers persisting > 1 month or if donor has related bronchitis, pneumonitis or esophagitis.
Hidradenitis [inflammation of the sweat gland(s)]	Acceptable after condition resolved and treatment complete.

MEDICAL CONDITION		COMMENT
High Blood Pressure		Accept if blood pressure at site is within NYBC guidelines. <i>See Criteria For An Acceptable Donation.</i>
Hirschsprung's Disease		Accept if recovered and asymptomatic.
Histoplasmosis		Accept if disease diagnosed by chest x-ray findings as inactive disease. Defer if disease is active.
HIV Test Confirmed Positive		Permanent deferral.
Hodgkin's Disease		Permanent deferral.
HTLV Test Confirmed Positive		Permanent deferral.
Human Bite		Defer 12 months if skin is broken, otherwise acceptable.
Huntington's Disease		Acceptable as long as movement disorder does not interfere with donation.
Hydrocephalus		Accept if mentally competent, no infection and no active seizure history.
Hyperlipidemia		Acceptable.
Hyperparathyroidism		Accept if asymptomatic.
Hypertension		Accept if blood pressure at site is within NYBC guidelines. <i>See Blood Pressure – DHQ User Brochure</i>
Hypoglycemia		Accept if asymptomatic.
Hypoparathyroidism		Accept if asymptomatic.
Hypotension		Accept if blood pressure at site is within NYBC guidelines. <i>See Blood Pressure – DHQ User Brochure</i>
Idiopathic Thrombocytopenic Purpura		Accept if had childhood ITP (acute) and now well. Accept if had gestational ITP and now well If had adult form of ITP call Medical Director or designee to evaluate.
Immunizations		<i>See Immunizations and Vaccinations</i>
Infections		See specific entity. If not listed, Medical Director to evaluate.
Infectious Mononucleosis		Defer until symptom free unless mono-associated hepatitis occurred.
Insect Bites		Defer if bite infected or in area of venipuncture.
Irregular Pulse	See MDC12-2	Refer also to Arrhythmias.
Irritable Bowel Syndrome		Acceptable if asymptomatic. Defer for 3 days after last episode of diarrhea.
Isosporiasis		Permanent deferral if chronic intestinal infection ( > 1 month duration of diarrhea)
Itching		Acceptable if not at venipuncture site.
IVIG (Intravenous Immune Globulin)		Determine underlying condition. Refer to Medical Director
Jacob-Creutzfeldt Disease		Permanent deferral.

MEDICAL CONDITION	COMMENT
Jaundice	Determine cause. Permanent deferral if cause is unknown or associated with any viral hepatitis <u>at age 11 or over</u> . (see also Viral Hepatitis, Mononucleosis) Accept non-viral jaundice, i.e., jaundice as a newborn, erythroblastosis fetalis (hemolytic disease of new born or Rh disease); jaundice secondary to gallstones, Gilbert's Disease, drug sensitivity or toxin.
Kaposi's Sarcoma	Permanent deferral
Kawasaki Syndrome	Accept if well and healthy with no cardiac complications.
Keratoconjunctivitis	Acceptable after condition resolved and treatment complete.
Kidney Disease	Permanent deferral if chronic renal failure. Deferral for 3 days if disease is current and active; otherwise, accept.
Kidney Stones	Accept if asymptomatic.
Kidney Transplantation	Defer for 12 months. Defer if still has chronic renal failure.
Laparoscopy	Evaluate reason for laparoscopy. Defer until incision is healed and released from physician's care.
Laparotomy	Evaluate reason for laparotomy. Defer until incision is healed and released from physician's care
Legionnaire's Disease	Acceptable after condition resolved and treatment complete.
Leishmaniasis	Permanent deferral.
Leukemia	Permanent deferral.
Leukoplakia	Accept.
Lipomas	Accept if not in antecubital areas and are benign. <i>If malignant, see Cancer.</i>
Liver Disease	See specific entities/jaundice. If not listed, Medical Director to evaluate.
Lou Gehrig's Disease	Permanent deferral.
Low Blood Pressure	Accept if blood pressure at site is within NYBC guidelines. <i>See Blood Pressure – DHQ User Brochure</i>
Lung Disorders	<i>See specific entity.</i> If not listed, Medical Director to evaluate.
Lung Surgery	Acceptable after released from doctor's care and feels well. Medical Director to evaluate reason for procedure. Underlying condition must be documented. ( <i>See specific entity.</i> )
Lupus (Discoid)	Accept if asymptomatic.
Lupus (Systemic)	Accept if asymptomatic.
Lyme Disease (Confirmed)	<ul style="list-style-type: none"> <li>• Donor is acceptable after treatment whether or not they are symptomatic.</li> <li>• Donor is acceptable after 30 days if asymptomatic whether or not treated.</li> </ul>
Lymphadenopathy (enlarged lymph nodes)	Medical Director evaluation.
Lymphoma	Permanent deferral.
Malaria	Diagnosis of malaria: Donors are acceptable 3 years from completion of therapy if they have remained symptom-free.

<b>MEDICAL CONDITION</b>	<b>COMMENT</b>
Malignancy	<i>See Cancer.</i>
Manic-Depressive Illness	Accept if mentally and legally responsible.
Marijuana use	Accept if currently not under the influence.
Mantoux Test	Diagnostic skin test for tuberculosis. <i>See Tuberculosis.</i>
Marfan's Syndrome	Medical Director or designee evaluation
Mastitis	Acceptable after condition is resolved and treatment completed.
Measles	Defer 21 days after exposure unless donor had immunization or previous infection.
Melanoma (or Malignant Melanoma)	If in remission for at least one year: acceptable.
Meniere's Disease	Accept if no problems of vertigo or dizziness when donor moves.
Meningitis	Acceptable after condition is resolved and treatment completed.
Migraine	Defer until resolved and feels well.
Miscarriage	Defer for 6 weeks from date of termination
Mitral Insufficiency / Mitral Valve Prolapse	Accept if: 1. asymptomatic, 2. no arrhythmias, 3. no limitation of activities.
Mononucleosis ("Mono")	Defer until symptom free unless mono-associated hepatitis occurred.
Multiple Myeloma	Permanent deferral.
Multiple Sclerosis	Accept if symptoms stable over the past 2 months with or without medications.
Mumps	Defer 14 days after resolution of symptoms.
Murmurs	Accept if: 1. asymptomatic, 2. no arrhythmias, 3. no limitation of activities.
Muscular Dystrophy	Accept if donor safety can be ensured during phlebotomy,
Myasthenia Gravis	Accept if asymptomatic.
Mycosis Fungoides	Permanent deferral.
Myocardial Infarction	Accept one year later if: 1. donor is asymptomatic, AND 2. donor has no limitation of activities, AND 3. donor's physician has given written approval regarding blood donation OR verbal approval by a NYBC MD, documented on the R/HH form.
Narcolepsy	Acceptable if condition doesn't interfere with donation.
Nephritis	Permanent deferral if chronic renal disease. Temporary deferral if disease active. Acceptable if disease resolved and kidney function normal.

MEDICAL CONDITION	COMMENT
Nephrosclerosis	Permanent deferral if chronic renal failure. Deferral for 3 days if disease is current and active; otherwise accept.
Neuralgia (Trigeminal)	Accept.
Neurofibromatosis	Accept if donor is in good health (no infections or malignancies) and has no lesions in the antecubital area that may interfere with the aseptic scrub.
Neurological Disorders	<ol style="list-style-type: none"> <li>1. Bell's Palsy - accept.</li> <li>2. Cerebral Palsy – acceptable but may defer if involuntary movements. Medical Director or designee to evaluate.</li> <li>3. Creutzfeldt-Jacob Disease - permanent deferral.</li> <li>4. Multiple sclerosis –Accept if symptoms stable over the past 2 months and off all medications.</li> <li>5. Narcolepsy - accept.</li> <li>6. Poliomyelitis – accept unless there is active infection.</li> <li>7. Progressive multifocal leukoencephalopathy - Permanent deferral.</li> <li>8. Tourette Syndrome - accept if movements will not affect phlebotomy.</li> </ol>
Non Specific Urethritis	Question any history of gonorrhea. Accept if asymptomatic
Nose Bleed (Epistaxis)	Accept if does not have bleeding disorder.
Nursing Mothers	Accept.
Osgood-Schlatter Disease	Accept.
Osteomyelitis	Acceptable two years after condition is confirmed cured
Osteoporosis	Acceptable.
Otitis Media	Acceptable after condition is resolved and treatment completed.
Ovarian Cysts	Acceptable once released from doctor's care and feels well. (Be certain that there was no diagnosis of malignancy.)
Pacemaker	Acceptable with Medical Director approval.
Paget's Disease Of Bone	Acceptable.
Paget's Disease Of Breast	In remission for at least one year: acceptable.
Palpitations <span style="border: 1px solid black; padding: 2px;">See MDC12-2</span>	<p>Acceptable if not due to cardiac disease and asymptomatic at time of donation.</p> <p>If cardiac,</p> <ol style="list-style-type: none"> <li>1. A donor with a history of palpitations (arrhythmia) may be accepted if: <ol style="list-style-type: none"> <li>a. donor is asymptomatic,</li> <li>b. donor has no history of other cardiac problems.</li> </ol> </li> <li>2. A donor with a history of palpitations (arrhythmia) <u>on medication</u> may be accepted if: <ol style="list-style-type: none"> <li>a. donor is asymptomatic,</li> <li>b. donor has no history of other cardiac problems.</li> <li>c. donor's physician provides written consent and/or NYBC physician gives medical clearance.</li> <li>d. donor is not taking any medication listed on the Medication Deferral List.</li> </ol> </li> </ol>
Pancreatitis	Acceptable after condition is resolved and treatment completed.
Papilloma Virus	Acceptable.
Parasitic Infections	See specific entity; if not listed refer to Medical Director.

<b>MEDICAL CONDITION</b>	<b>COMMENT</b>
Parkinson's Disease	Acceptable if condition doesn't interfere with donation.
Paroxysmal Nocturnal Hemoglobinuria	Permanent deferral.
Parvovirus	Defer until donor afebrile and free of major symptoms. Exposure requires 21-day deferral from time of exposure.
Pelvic Inflammatory Disease	Acceptable after condition is resolved and treatment completed. If causative agent is sexually transmitted i.e. gonorrhea, defer 12 months from completion of treatment.
Pemphigoid/Pemphigus Vulgaris	Acceptable if venipuncture sites are clear.
Pericarditis	Accept after treatment and condition resolved. If taking prophylactic antibiotics, acceptable.
Periodontal Disease	Active disease acceptable 3 days after condition resolved and treatment completed. If on maintenance therapy (e.g., Periostat) acceptable
Peripheral Vascular Disease	Accept if donor meets all other criteria. (Question donor about heart disease.)
Peritoneal Dialysis	Permanent deferral for chronic dialysis patients.
Pernicious Anemia	Accept if hemoglobin within donor limits.
Pertussis	Medical Director to evaluate
Phlebitis	If superficial: accept if asymptomatic. Deep vein thrombosis: accept if asymptomatic and at least one month after completion of anticoagulation therapy.
Pilonidal Cysts	Accept if meets all donor criteria, no chronic fever and no antibiotics.
Pituitary Growth Hormone	Human derived growth hormone – permanent deferral. NOTE: The use of human derived pituitary growth hormone was discontinued by the FDA in 1985. Recombinant or synthetic growth hormone – acceptable.
Pityriasis	Accept if lesions not in antecubital regions.
Pleurisy	Defer until symptom free.
Pneumocystis Carinii Pneumonia (PCP)	Permanent deferral
Pneumonia	Bacterial or viral types - acceptable after condition is resolved and treatment completed.
Pneumothorax	Accept if resolved.
Poison Ivy	Accept if no secondary infection and venipuncture sites clear.
Poliomyelitis	Accept unless there is active infection.
Polycystic Kidney Disease	Accept if renal function normal. Permanent deferral if renal function abnormal.
Polycystic Ovary Syndrome	Acceptable.
Polycythemia	Permanent deferral except if testosterone related polycythemia, then defer for 6 months.
Polymyalgia Rheumatica	Accept if asymptomatic.
Polymyositis	Accept if asymptomatic.

<b>MEDICAL CONDITION</b>	<b>COMMENT</b>
Porphyria Cutanea Tarda	Permanent deferral.
Post-Splenectomy	Accept if removed because of trauma or spontaneous rupture. If removed for disease, refer to Medical Director.
Pott's Disease	Defer if active disease. . For active infection - defer 2 years after diagnosis provided treatment is complete. Accept, if exposure and on anti-tubercular drugs and had negative chest x-ray.  Accept if had positive skin test and negative chest x-ray.
PPD Test (Purified Protein Derivative)	Diagnostic skin test for tuberculosis. Donors who have just received a TB skin test because of exposure but have not yet had the test read are to be deferred until skin test is evaluated.  Donors who have just received a TB skin test as part of employment screening or yearly physical, but have not yet had the test read, are acceptable.
Pregnancy	Defer for 6 weeks after full term delivery, miscarriage or abortion. Donation during pregnancy will be acceptable only if medically indicated.
Progressive Multifocal Leukoencephalopathy	Permanent deferral.
Progressive Systemic Sclerosis	Accept if asymptomatic.
Prostate Disorder	Enlarged prostate without cancer (benign prostatic hypertrophy): accept. Prostate cancer: acceptable if in remission for at least one year. Prostatitis: acceptable after condition resolved and treatment complete.
Prostatitis	Acceptable after condition is resolved and treatment completed.
Psoriasis	Accept if no secondary infection, lesions not in area of venipuncture and donor has not been treated with Tegison.
Psychiatric Problems	Accept if mentally and legally competent.
Pulmonary Embolism	Accept if condition resolved, donor asymptomatic and at least one month after completion of anticoagulation therapy.
Pyelonephritis	Permanent deferral if chronic renal disease. Temporary deferral if disease active. Acceptable if disease resolved and kidney function normal.
Q Fever	Permanent deferral.
Raynaud's Disease (Phenomenon)	Acceptable if asymptomatic at time of donation.
Reflux, Gastro esophageal	Acceptable.
Regional Enteritis	Acceptable if asymptomatic
Reiter's Syndrome	Accept if asymptomatic.
Relapsing Fever	Medical Director to evaluate.
Renal Calculi	Acceptable if asymptomatic.
Renal Failure	Permanent deferral if chronic.
Respiratory Infection (Viral)	Defer for active symptoms of a cold, flu, or upper respiratory infection (URI, sore throat) until symptoms have subsided and have been symptom free for 3 days.
Reticuloendotheliosis (Hairy Cell Leukemia)	Permanent deferral.

MEDICAL CONDITION	COMMENT
Reye's Syndrome	Accept, if recovered and liver function normal.
Rheumatic fever	2 years following the date of cessation of symptoms, unless evidence of chronic heart disease
Rheumatic Heart Disease	Defer if symptomatic, activities limited and/or on medication. Prophylactic antibiotics are acceptable.
Ringworm	Accept if not in antecubital region.
Rocky Mountain Spotted Fever	Once antibiotics completed, wait 1 week. If no recurrence, accept.
Ronnel (Insecticide) Poisoning/ Exposure	Temporary deferral for 2 weeks after skin exposure. (Agent is an anti-cholinesterase, may alter red cell stability.)
Root Canal Surgery	If with no signs or symptoms of infection: defer 3 days. If sutures are present defer until removed and wound healed.
Rosacea	Accept unless donor has secondary infections.
Roseola	Defer for 2 weeks after recovered.
Rubella (German Measles)	Defer one month after exposure unless donor had immunization or previous infection.
Salmonella	Acceptable after condition is resolved and treatment completed. Medical Director to evaluate if recurrent.
Sarcoidosis	No deferral
Sarcoma	Acceptable if in remission for at least one year.
Scabies	Defer until off medication and asymptomatic
Scarlet Fever	Accept if well and asymptomatic. If heart disease involved, <i>see Rheumatic Heart Disease</i> . If exposed to patient, defer until 2 days after exposure and well.
Scarring	12 month deferral if intentional skin scarring to make a design
Schizophrenia	Accept if donor is mentally and legally competent.
Scleroderma	Accept if stable disease.
Seizures	Acceptable as long as seizure-free in the past month. If was due to cancer, acceptable if in remission for at least one year.
Sepsis	Acceptable 1 week after condition is resolved and treatment completed.
Severe Acute Respiratory Syndrome (SARS)	1. Donors with a history of SARS, suspected of having SARS, or being treated for SARS: Acceptable 28 days after symptoms are resolved and treatment is complete. 2. Donors who have been in close contact (i.e., cared for, lived with or had direct contact with body fluids) with someone with SARS or suspected of having SARS: Acceptable 14 days after last exposure provided donor is asymptomatic.
Shigella	Accept if resolved or asymptomatic. Defer for 3 days after last episode of diarrhea.
Shingles	Defer while active lesions present and for 1 week afterwards. Accept when lesions inactive.
Shortness Of Breath	Shortness of breath on exertion is acceptable, providing donor is active and has no restrictions on his/her activities
Sickle Cell Disease	Permanent deferral.

MEDICAL CONDITION	COMMENT
Sickle Cell Trait	Accept. <b>NOTE:</b> Do not collect RBC apheresis products using automated Leuko reduction technology
Sinusitis	Acceptable after condition is resolved and treatment completed.
Sjogren's Syndrome	Accept.
Skin Infections	Accept mild skin disorders, i.e., acne, psoriasis, poison ivy, without secondary infection. Venipuncture site must be clear. Defer for 3 days or until treatment is complete and condition is resolved (whichever is longest period): any skin infection at the venipuncture site, severe skin infection anywhere on the body or any undiagnosed skin lesions.
Skin Piercing	Accept only if performed with single-use equipment and under aseptic conditions; otherwise defer 12 months.
Smallpox Vaccine Exposure	For any donor who has come in close contact with someone who received smallpox vaccine (i.e., touched the vaccination site, touched the bandages or covering of vaccination site, handled bedding or clothing that has come in contact with a vaccination site): If asymptomatic - accept If symptomatic (development of 'blister' at site of exposure) or severe complications - defer for eight weeks after the onset of symptoms or 14 days after resolution of symptoms, whichever is longer. Severe complications include the following: Rash (resembling 'blisters') covering a small or large area of the body; necrosis (tissue death) in the area of exposure; inflammation of the brain (encephalitis); infection of the cornea (eye); localized or systemic skin reaction in someone with eczema or other chronic skin condition.
Sore Throat	Defer for active symptoms of a cold, flu, or upper respiratory infection (URI, sore throat) until symptoms have subsided and have been symptom free for 3 days.
Spherocytosis	Permanent deferral.
Splenectomy	Accept if removed because of trauma or spontaneous rupture. If removed for disease, refer to Medical Director.
Spondylitis	Accept if no limitation of motion (can sit in donor chairs).
Stein-Leventhal Syndrome	Acceptable
Stem Cell Donation	Defer for 8 weeks after procedure.
Stenting (Coronary)	Accept 6 months after procedure if: 1) donor is asymptomatic, 2) donor has no limitation of activities
Stitches	Defer until stitches removed and wound healed.
Strep Throat	Acceptable after treatment completed and condition is resolved.
Stroke	Accept if: 1. one year after the stroke; 2. the donor is stable with or without deficits; 3. if received anticoagulation therapy, it is complete for at least one month.
Surgical Procedures	Accept if released from doctor's care, feels well, and full activity has been resumed. Medical Director or designee to evaluate pre-op disease process, if necessary. Defer 12 months if transfused. <b>NOTE: Autologous platelet enriched plasma injection treatments - accept</b>

MEDICAL CONDITION	COMMENT
Syphilis	Defer for 12 months after treatment completed.
Systemic Lupus Erythematosus (SLE)	Accept if asymptomatic.
Tachycardia (elevated heart rate)	See "Pulse" - DHQ User Brochure <span style="border: 1px solid black; padding: 2px;">See MDC12-2</span>
Tattoos	Defer 12 months unless tattooed in a licensed NJ parlor (see Q27 in DHQ User Brochure)
Tendonitis	Accept if no acute symptoms
Thalassemia Major	Permanent deferral.
Thalassemia Trait/Minor	Accept, if hemoglobin is within the acceptable range.
Thrombophlebitis	Superficial: accept if asymptomatic. Deep vein thrombosis: accept if condition resolved and at least one month after completion of anticoagulation therapy.
Thrombophilia	Permanent deferral if had more than one thromboembolic episode. Anticoagulation therapy, if received, must be finished for at least one month.
Thyroid Disorders	Hyperthyroidism and Hypothyroidism: Accept once euthyroid (normal thyroid function) NOTE: Thyroid hormone replacement therapy acceptable.
Tick Bite	If asymptomatic defer for 2 weeks following bite, regardless of treatment. Defer for 3 months if febrile or symptomatic. If donor has a diagnosis, i.e., <i>Babesiosis Lyme Disease, Ehrlichiosis, Rocky Mountain Spotted Fever</i> , see specific entity.
Tinea Versicolor Infection	Accept if venipuncture site is clear
Tonsillectomy & Adenoidectomy	Accept if released from doctor's care, feels well, and full activity has been resumed. Medical Director or designee to evaluate pre-op disease process, if necessary. Defer 12 months if transfused.
Tonsillitis	Acceptable after condition is resolved and treatment completed.
Tooth Extractions	If with no signs or symptoms of infection: defer 3 days. If sutures are present defer until removed and wound healed.
Tourette Syndrome	Accept if movements do not affect phlebotomy.
Toxic Shock Syndrome	Acceptable after condition is resolved and treatment completed.
Toxoplasmosis	Accept one week after cessation of therapy and donor feels well
Transfusion	Defer 12 months.
Transient Ischemic Attacks (T.I.A.)	Accept if: 1. one year after the stroke; 2. the donor is stable; 3. if received anticoagulation therapy, it is complete for at least one month.
Transplant	Defer for 12 months recipients of an allogeneic skin, tissue or bone fragment transplant. Defer for 12 months recipients of an organ transplant. Permanent deferral for cornea or dura mater (or brain covering) graft. Permanent deferral for bone marrow or hematopoietic stem cell transplant. Permanent deferral for xenotransplantation.

MEDICAL CONDITION	COMMENT
Trichomoniasis	Accept after treatment and <u>asymptomatic</u>
Trypanosomiasis	Permanent deferral.
Tuberculosis	For active infection - defer 2 years after diagnosis provided treatment is complete. Accept, if exposure and on anti-tubercular drugs and had negative chest x-ray.  Accept if had positive skin test and negative chest x-ray.
Tuberculosis Skin Test	Donors who have just received a TB skin test because of exposure but have not yet had the test read are to be deferred until skin test is evaluated. Donors who have just received a TB skin test as part of employment screening or yearly physical, but have not yet had the test read, are acceptable.
Typhoid Fever (Salmonella)	Acceptable after condition is resolved and treatment completed. Medical Director to evaluate if recurrent.
Ulcer Disease	Accept if asymptomatic.
Ulcerative Colitis	Accept if asymptomatic and no diarrhea for 3 days.
Undulant Fever (Brucellosis)	Defer 2 years after diagnosis provided treatment is complete and has no recurrence.
Urinary Tract Infection	Acceptable after treatment completed and condition is resolved. Accept if on prophylactic antibiotics and asymptomatic
Urticaria	Defer only if lesions in area of venipuncture.
Uterine Bleeding	1. If cause unknown – defer until evaluated by donor's doctor. 2. If non-malignant and meets donor criteria - accept.
Vaccinations	<i>See Immunizations and Vaccinations.</i>
Vaginitis	Accept.
Varicella-Zoster Infection (Shingles)	Defer while active lesions present and for 1 week afterwards. Accept when lesions inactive.
Vasectomy	Defer 3 days.
Venereal Warts (Human Papilloma Virus)	Accept.
Venereal Disease	<i>See specific disease.</i>
Viral Hepatitis	Permanent deferral for a donor with a history of <u>any</u> viral hepatitis at age 11 or over (includes A, B, C and mononucleosis-associated hepatitis). Donors who have tested positive for Hepatitis Bs antibodies (anti-HBs) following immunization (e.g., HeptaVax), are acceptable. NOTE: History of non-viral hepatitis caused by alcohol ingestion, drug sensitivity or toxin is acceptable provided donor meets all other criteria for donation.
Viral Infections	Defer until donor afebrile and free of symptoms. If exposed to childhood infection or contagious disease, <i>see specific entity.</i>
Von Recklinghausen's Disease	Accept if donor is in good health (no infections or malignancies) and has no lesions in the antecubital area that may interfere with the aseptic scrub.
Von Willebrand's Disease	Permanent deferral.
Warts	Accept. If recently removed and asymptomatic and no sign of infection accept.

MEDICAL CONDITION	COMMENT
West Nile Virus (WNV)	For medical diagnosis (symptoms and laboratory results) of WNV or suspected WNV illness or infection: Defer for 120 days after diagnosis or onset of illness, whichever is the longest time period.
Wilm's Tumor	Accept if in remission for at least one year.
Wolff- Parkinson-White Syndrome <div data-bbox="321 348 532 401" style="border: 1px solid black; padding: 2px; display: inline-block;">See MDC12-2</div>	<ol style="list-style-type: none"> <li>1. A donor with a history of arrhythmia may be accepted if: <ol style="list-style-type: none"> <li>a. donor is asymptomatic,</li> <li>b. donor has no history of other cardiac problems.</li> </ol> </li> <li>2. A donor with a history of arrhythmia <u>on medication</u> may be accepted if: <ol style="list-style-type: none"> <li>a. donor is asymptomatic,</li> <li>b. donor has no history of other cardiac problems.</li> <li>c. donor's physician provides written consent and/or NYBC physician gives medical clearance.</li> <li>d. donor is not taking any medication listed on the Medication Deferral List.</li> </ol> </li> </ol>
World Trade Center Cough	Accept if asymptomatic.
Wilson's Disease	Accept if not jaundiced.
Xenotransplantation	Permanent deferral.
Yeast Infection	Vaginal - Accept. Thrush – Medical Director to evaluate