

Issued by JPAC: 31 May 2022

Implementation: To be determined by each Service

Change Notification UK National Blood Services No. 31 - 2022

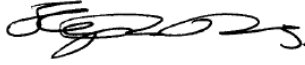
Arrhythmias

These changes apply to the Bone Marrow and Peripheral Cells Donor Selection Guidelines.

Please amend the following entry.

<i>Obligatory</i>	<p>1. Must not donate if: Symptomatic or requires treatment.</p> <p>a) Symptomatic or requires treatment.</p> <p>b) The donor is undergoing investigation.</p> <p>c) The donor has a history of an arrhythmia (e.g. Atrial Fibrillation, Atrial Flutter, Supraventricular Tachycardia, Ventricular Tachycardia) even if their symptoms have now settled.</p> <p>2. In other cases: Refer to Designated Clinical Support Medical Officer.</p>
<i>Discretionary</i>	<p>1. Donors with a previous history of an arrhythmia triggered by a noncardiac medical condition which has now been treated (e.g. thyrotoxicosis), refer to a Designated Medical Officer.</p> <p>2. Donors who have been treated by ablation therapy for Supraventricular Tachycardia (including Wolff-Parkinson White Syndrome), refer to a Designated Medical Officer.</p> <p>3. Donors with a history of palpitations where the donor has been assessed clinically and a cardiac cause has been excluded, accept.</p>
<i>See if Relevant</i>	Cardiovascular Disease
<i>Additional Information</i>	Some heart irregularities may be made worse through blood loss or by a general anaesthetic. It may be necessary to contact the specialist who has made the diagnosis. This includes a risk that donation could trigger a recurrence in someone with a history of a previous arrhythmia. In cases where

	the donor's eligibility is not clear, Designated Clinical Support Officer referral ensures further information can be sought regarding their condition.
<i>Reason for Change</i>	This entry has been revised to clarify the obligatory and discretionary criteria.



Dr Stephen Thomas
Professional Director - Joint UKBTS Professional Advisory Committee
✉ stephen.thomas@nhsbt.nhs.uk