READMITTANCE OF BLOOD DONORS WHO HAVE TESTED REPEATEDLY POSITIVE BUT ARE NOT CONFIRMED HIV ANTIBODY POSITIVE

1. At the meeting of the EAGA in May 1987 members were asked to endorse the recommendations of the Screening sub-Group of the EAGA. This was with regard to the protocol to be followed to allow donors who had had repeatedly positive HIV antibody tests unconfirmed by the Reference laboratory back onto the donor panel.

2. In general the recommendations were endorsed.

3. Dr Contreras drew attention of members to the organisational difficulties of the recommendation requiring that the records of donors who transfer to give blood at a new Centre be checked to ensure that previous donations had not been found antibody positive. EAGA members agreed that this recommendation should be considered further
by the Regional Transfusion Directors Committee.

4. At the meeting of the Regional Transfusion Directors in July it was universally agreed that it would not be practical or even possible at some Centres to check previous records of donors in this way.

5. EAGA members are asked to confirm the recommendations below. These do not include the requirement to check the records of donors who present to give blood in another Region.

6. <u>Readmittance of donors to the panel when HIV antibody tests have</u> been repeatedly positive at the RTC but unconfirmed by the Reference Centre

a. Where a donor is repeatedly anti HIV positive when tested at the Regional Transfusion Centre (RTC) the donation should not be used. If the positive result is not confirmed by the Reference laboratory the donors card should be flagged. The donor need not be contacted or informed of the results.

b. The donor should be recalled as usual 6 months later, the donation collected should not be used but if tests at the RTC are negative and are confirmed negative by the Reference laboratory then the donors blood can be used for transfusion at the following visit.

c. If the donor presents to give blood in under 6 months time the blood should not be used and any negative test results disregarded. At least 6 months should elapse between a positive unconfirmed test and the negative test which can be regarded as a basis on which the donor is restored to the panel for transfusion services at the next (third) attendance.

d. Where a donor has repeatedly positive results which are unconfirmed on more than one occasion it will be necessary to ask the donor to come and discuss the atypical results and 1

advise that no further donation should be given. The Regional Transfusion Director should discuss with a consultant at the Reference Laboratory if further tests are required.

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