

SEEKING PLASMA DONATIONS FROM RECOVERED COVID-19 PATIENTS

Versiti™, the blood bank Northwest Community Healthcare (NCH) uses is collecting plasma from recovered COVID-19 patients to help treat others who are having complications from the disease. This process is different than when you donate regular plasma, so to make this process easier for our patients, NCH is helping Versiti by providing the required form and information about donations to potential donors.

The use of convalescent plasma to help treat others is investigational. This means it is not approved by the FDA, however there has been initial data to support its use and the FDA issued an Emergency Use Authorization which allows physicians to use it to treat patients.

Anyone who has recovered from Covid and would like to donate their plasma must meet all of the regular requirements to donate plasma. In addition, you must: have had a laboratory confirmed diagnosis of COVID-19 or have had 2 positive antibody tests from different companies. For example, one from NCH, which uses Mayo clinic, and one from Quest, which as their own.

For NCH patients, to initiate this process, please complete the form on the next page and email it to covid19plasmal@versiti.org along with any test results you have indicated on the form. It can take up to two weeks to hear back from Versiti.

If you have any questions, or do not hear back from Versiti in 10 business days, please contact us at covid19plasmainfo@nch.org.



CoVID-19 Convalescent Donor Pre-Screening

Thank you for your interest in being a donor of CoVID-19 convalescent plasma

Please complete the form and return it to the email address at the bottom of the page along with a copy of your testing results.

Once a completed form is received, you will be contacted by a blood center representative to answer a few pre-donation questions and to make an appointment.

Donor Name: _____ Phone: _____
Address: _____ Email: _____
Address: _____ Male Female DOB _____

1. Did you (donor) have a positive CoVID-19 test result (molecular diagnostic test)?
 NO YES: Date of test _____ (Copy needed)
2. Did you (donor) have **2** positive serological tests for SARS-CoV-2 antibodies from different companies?
 NO YES: Date of test #1 _____ (Copy needed)
Date of test #2 _____ (Copy needed)
3. Date when you (donor) became symptom-free? Date: _____
4. Have you (donor) been symptom-free for at least 14 days?
 NO YES
5. Were you hospitalized for CoVID-19?
 NO YES
6. If **female**, have you ever been pregnant? (If **male** leave blank)
 NO YES

Thank you for being willing to help others fight this disease.

Return this form and test results (screen shots OK) to COVID19PlasmalL@versiti.org
If you have any questions, they can be directed to COVID19PlasmalL@versiti.org