

LETTER TO THE ATTENDING PHYSICIAN (AGE MEDICAL ENQUIRY)

DONOR: TO READ AND COMPLETE

I agree to allow my physician to provide the medical information requested on this letter to Canadian Blood Services, for assessment of, but not determination of my eligibility to donate.

Print Name: _____ **Sign Name:** _____

Print date of birth: ___/___/___ **Telephone #:** _____
MM DD YYYY

PHYSICIAN: TO READ AND COMPLETE

Dear Physician:

Canadian Blood Services personnel evaluate a donor's eligibility to donate blood or plasma/platelets with each donation, after completion of a health assessment questionnaire, measurement of vital signs and a screening test for hemoglobin level.

For donor safety reasons, we require the advice of the attending physician for donors who fall within the following age categories:

- First time donors between the ages of 61 and 71 (61st birthday to 71st birthday);
- Donors between the ages of 67 and 71 (67th birthday to 71st birthday) who have not given in the last two years;
- Annually for donors who are 71 years old or over. Donors 71 and over must have given at least once in the last two years.

We request your opinion of your patient's fitness to tolerate donations of approximately 500 mL of blood, at intervals of 56 days or less frequently, or apheresis donations of 300 to 500 mL of plasma and/or platelets made more frequently. Please consider if this patient has any cardiovascular condition or other disease that may affect his/her ability to tolerate donation. Final eligibility determination rests with Canadian Blood Services.

He/She is fit to donate.

He/She is not recommended to donate. Please explain: _____

Print Physician Name _____ **Physician Signature** _____ **Date** _____

Physician Address

Please advise us if you become aware of a post-donation reaction in this patient.
Thank you for your assistance.

FOR CANADIAN BLOOD SERVICES STAFF USE ONLY

Donor's CBS ID #: _____

Accept Defer Reason for deferral (if applicable): _____

Completed by _____ **Date** _____

(yyyy-mm-dd)