

**National Blood Transfusion Service**

Guardamangia Hill,
Pietà PTA 1314 Malta
Tel: 21234047

Website: www.blood.gov.mt
E-mail: customercare.nbts@gov.mt

Blood Donation Centre

St Luke's Square,
Guardamangia PTA 1010 Malta
Tel: 21234767 / 22066201 / 79307307
Free Phone: 80074313

Facebook: www.facebook.com/bloodmalta
Mobile App: Blood Donors MT

Consent for Autologous Transfusion

The reason why I will be receiving my own previously donated blood, was explained to me by

Dr _____.

- I agree to donating blood for the purpose of receiving it again during my procedure should the need arise.
- I understand that I may not require all the blood or blood products I have donated, or may not be able to receive them for technical reasons.
- I understand that, should I not receive all or some of the blood/blood products that I have donated, these will not be given to anyone else, but instead will be discarded.
- I understand that I might receive blood donated by other donors instead of that which I donated by myself.
- I agree that my donation will be tested and processed as per standard NBTS practice.
- I declare that I have been fully informed about the procedure of Autologous Donation and Transfusion, including any complications which may arise, and that I have been given sufficient time to ask any relevant questions.

Donor's Full Name:		I.D. Card No:	
Signature of Donor:		Date:	

NBTC Officer's Full Name:		I.D. Card No:	
Signature of NBTS Officer:		Date:	

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