



## BDMS Health History Questions

**Blood Donor Management System (BDMS)  
Sustainment and Maintenance Services**

**Contract# NNG07DA45B**

**Order Number W81XWH-11-F-0086**

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## **Section 1 - Introduction**

The following document provides screenshots of all Donor Health History Questionnaire questions in the Blood Donor Management System (BDMS). The questions are based on the current version of the UDHQ, and consist of separate question sets for Allogeneic, Autologous, and Therapeutic donations. Each question set contains a required competency assessment, in addition to all questions required for that donation type. All sex-specific questions are noted as such above the related screenshot.

# Allogeneic Questions

## COMPETENCY

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE ▶ TRAK®
Rel: 14	RESP: Donor Response	ACA001	


Self review screen access validation

Welcome THOMAS JOHNSON

Please verify your ability to read and understand English. Type YES and press the ENTER Key.

Ask the screener for assistance if you do not understand the process.

Cancel

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**Are you feeling healthy and well today?**

Answer by clicking on the appropriate "Yes" or "No" button

|

**Phlebotomy Use:** User ID:  Password:  DN00000018

2.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JOHNSON, THOMAS  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 2      Question Code: 2

**Are you currently taking an antibiotic?**


          

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN00000018

3.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**Are you currently taking any other medications for an infection?**

Answer by clicking on the appropriate "Yes" or "No" button

Phlebotomy Use: User ID:  Password:  DN00000018



4.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JOHNSON, THOMAS  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 4 Question Code: 4

**Are you now taking or have you ever taken any medication on the Medication Deferral List?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

5.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**Have you read the educational materials?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

6.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE-TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past 48 hours, have you taken aspirin or anything that has aspirin in it?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

**7. (FEMALE DONORS ONLY)**

12-05-2013 10:43	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	
LifeTrak Donor Self Response Screen			
Name : JOHNSON, MARY			
Address : 123 TEST LANE ALEXANDRIA VA 22304			
<b>Donor Response</b>			
Question Number: 7			Question Code: 7
<b>In the past 6 weeks have you been pregnant or are you pregnant now?</b>			
<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Read More"/>			
Answer by clicking on the appropriate "Yes" or "No" button			
<input type="text"/>			
<input type="button" value="Backward"/> <input type="button" value="Forward"/> <input type="button" value="Stop"/>			
<b>Phlebotomy Use:</b>	User ID: <input type="text"/>	Password: <input type="text"/>	DN00000019

8.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past 8 weeks have you donated blood, platelets or plasma?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

9.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**In the past 8 weeks have you had any vaccinations or other shots?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

10.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past 8 weeks have you had contact with someone who had a smallpox vaccination?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

11.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JOHNSON, THOMAS  
Address : 123 TEST LANE ALEXANDRIA VA 22304

[Donor Response](#)

Question Number: 11      Question Code: 11

**In the past 16 weeks have you donated a double unit of red cells using an apheresis machine?**


Answer by clicking on the appropriate "Yes" or "No" button

Phlebotomy Use:    User ID:     Password:       DN00000018



12.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past 12 months have you had a blood transfusion?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

13.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name: **JOHNSON, THOMAS**

Address: **123 TEST LANE ALEXANDRIA VA 22304**

**Donor Response**

Question Number: **13**      Question Code: **13**

**In the past 12 months have you had a transplant such as organ, tissue, or bone marrow?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       **DN00000018**

14.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JOHNSON, THOMAS  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 14      Question Code: 14

**In the past 12 months have you had a graft such as bone or skin?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN00000018

15.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: **15** Question Code: **15**

**In the past 12 months have you come into contact with someone else's blood?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

16.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**


Question Number: **16** Question Code: **16**

**In the past 12 months have you had an accidental needle-stick?**

Answer by clicking on the appropriate "Yes" or "No" button

Phlebotomy Use: User ID:  Password:  DN00000018

17.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: **17** Question Code: **17**

**In the past 12 months have you had sexual contact with anyone who has HIV/AIDS or has had a positive test for the HIV/AIDS virus?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

18.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past 12 months have you had sexual contact with a prostitute or anyone else who takes money or drugs or other payment for sex?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN0000018

19.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:


**In the past 12 months have you had sexual contact with anyone who has ever used needles to take drugs or steroids, or anything NOT prescribed by their doctor?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018



20.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**In the past 12 months have you had sexual contact with anyone who has hemophilia or has used clotting factor concentrates?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

**21. (FEMALE DONORS ONLY)**

12-05-2013 10:43	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past 12 months have you had sexual contact with a male who has ever had sexual contact with another male?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000019

22.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**In the past 12 months have you had sexual contact with a person who has hepatitis?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

23.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**In the past 12 months have you lived with a person who has hepatitis?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

24.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past 12 months have you had a tattoo?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

25.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past 12 months have you had ear or body piercing?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

26.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**In the past 12 months have you had or been treated for syphilis or gonorrhea?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

27.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:


**In the past 12 months have you been in juvenile detention, lockup, jail, or prison for more than 72 hours?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018



28.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**In the past three years have you been outside the United States or Canada?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

29.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**From 1980 through 1996, did you spend time that adds up to three (3) months or more in the United Kingdom?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

30.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**From 1980 through 1996, were you a member of the U.S. military, a civilian military employee, or a dependent of a member of the U.S. military?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

31.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: **31** Question Code: **31**

**From 1980 to the present, did you spend time that adds up to five (5) years or more in Europe?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

32.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**From 1980 to the present, did you receive a blood transfusion in the United Kingdom or France?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

33.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**From 1977 to the present, have you received money, drugs, or other payment for sex?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

**34. (MALE DONORS ONLY)**

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**From 1977 to the present, have you had sexual contact with another male, even once?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

35.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**Have you EVER had a positive test for the HIV/AIDS virus?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018



36.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**


Question Number: **36** Question Code: **36**

**Have you EVER used needles to take drugs, steroids, or anything not prescribed by your doctor?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

37.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**Have you EVER used clotting factor concentrates?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

38.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: **38** Question Code: **38**

**Have you EVER had hepatitis?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

39.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**Have you EVER had malaria?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

40.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: **40** Question Code: **40**

**Have you EVER had Chagas disease?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

41.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	
LifeTrak Donor Self Response Screen			
Name : JOHNSON, THOMAS			
Address : 123 TEST LANE ALEXANDRIA VA 22304			
Donor Response			
Question Number: 41		Question Code: 41	
<b>Have you EVER had babesiosis?</b>			
<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Read More"/>			
Answer by clicking on the appropriate "Yes" or "No" button			
<input type="text"/>			
<input type="button" value="Backward"/>		<input type="button" value="Forward"/>	
<input type="button" value="Stop"/>			
Phlebotomy Use:	User ID: <input type="text"/>	Password: <input type="text"/>	DN00000018

42.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JOHNSON, THOMAS  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 42      Question Code: 42

**Have you EVER received a dura mater (or brain covering) graft?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:     DN00000018

43.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: **43** Question Code: **43**


**Have you EVER had any type of cancer, including leukemia?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018



44.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**Have you EVER had any problems with your heart or lungs?**

Answer by clicking on the appropriate "Yes" or "No" button

Phlebotomy Use: User ID:  Password:  DN00000018

45.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**


Question Number: **45** Question Code: **45**

**Have you EVER had a bleeding condition or a blood disease?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

46.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**


Question Number:  Question Code:

**Have you EVER had sexual contact with anyone who was born in or lived in Africa?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:

47.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**


Question Number: **47** Question Code: **47**

**Have you EVER been to Africa?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

48.

12-05-2013 10:20	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **JOHNSON, THOMAS**

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: **48** Question Code: **48**

**Have any of your relatives had Creutzfeldt-Jakob disease?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000018

# Autologous Questions

## COMPETENCY

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

Self review screen access validation


Welcome FLOYD THOMAS

Please verify your ability to read and understand English. Type YES and press the ENTER Key.

Ask the screener for assistance if you do not understand the process.

Cancel

**1. (FEMALE DONORS ONLY)**

12-05-2013 10:57	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, MARIA  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 101      Question Code: 101

**Are you pregnant now, or have you been pregnant in the past 6 weeks?**

Answer by clicking on the appropriate "Yes" or "No" button


**Phlebotomy Use:**    User ID:     Password:       DN00000021

2.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	
LifeTrak Donor Self Response Screen			
Name : THOMAS, FLOYD			
Address : 123 TEST LANE ALEXANDRIA VA 22304			
<b>Donor Response</b>			
Question Number: 102		Question Code: 102	
<b>Are you feeling well and healthy today?</b>			
<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Read More"/>			
Answer by clicking on the appropriate "Yes" or "No" button			
<input type="text"/>   <input type="text"/>			
<input type="button" value="Backward"/>		<input type="button" value="Forward"/>	
<input type="button" value="Stop"/>			
Phlebotomy Use: User ID: <input type="text"/>		Password: <input type="text"/> DN00000020	



3.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, FLOYD  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 103      Question Code: 103

**Have you read and do you understand all the donor information presented to you, and have your questions been answered?**


          

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN00000020

4.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, FLOYD

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 104      Question Code: 104

**Have you ever given blood under another name or Social Security Number?**


          

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN0000020

5.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, FLOYD  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 105      Question Code: 105

**Have you ever been refused as a blood donor or told not to donate blood?**

Answer by clicking on the appropriate "Yes" or "No" button


          

**Phlebotomy Use:**    User ID:     Password:       DN00000020

6.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	
LifeTrak Donor Self Response Screen			
Name : THOMAS, FLOYD			
Address : 123 TEST LANE ALEXANDRIA VA 22304			
<b>Donor Response</b>			
Question Number: 106		Question Code: 106	
<b>Have you had any illness or infection in the last 14 days?</b>			
<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Read More"/>			
Answer by clicking on the appropriate "Yes" or "No" button			
<input type="text"/>			
<input type="button" value="Backward"/>		<input type="button" value="Forward"/>	
<input type="button" value="Stop"/>			
<b>Phlebotomy Use:</b>	User ID: <input type="text"/>	Password: <input type="text"/>	DN00000020

7.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, FLOYD

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 107      Question Code: 107

**Are you scheduled for any procedure in Radiology today or tomorrow?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN0000020

8.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, FLOYD  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 108      Question Code: 108

**Have you ever had yellow jaundice, liver disease, hepatitis, or a positive test for hepatitis?**


          

Answer by clicking on the appropriate "Yes" or "No" button

Phlebotomy Use:    User ID:     Password:       DN00000020

9.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**Have you ever had chest pain, heart disease, or lung disease?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000020

10.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, FLOYD  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: **110** Question Code: **110**


**Have you ever had fainting spells, convulsions or seizures?**

Answer by clicking on the appropriate "Yes" or "No" button

Phlebotomy Use: User ID:  Password:  DN00000020



11.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : **THOMAS, FLOYD**

Address : **123 TEST LANE ALEXANDRIA VA 22304**

**Donor Response**


Question Number: **111** Question Code: **111**

**In the past 4 weeks, have you taken any pills or medications or had any injections?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN00000020

12.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, FLOYD

Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 112      Question Code: 112

**Are you taking any iron medications?**


          

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN00000020

13.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : THOMAS, FLOYD  
Address : 123 TEST LANE ALEXANDRIA VA 22304

**Donor Response**

Question Number: 113      Question Code: 113

**In the past 8 weeks, have you received a smallpox vaccination or have you had close contact with the vaccination site of anyone else?**


          

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN00000020

14.

12-05-2013 10:48	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name :

Address :

**Donor Response**

Question Number:  Question Code:

**Do you have a consult from your Provider?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:** User ID:  Password:  DN0000020

# Therapeutic Questions

## COMPETENCY

12-05-2013 11:08	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

Self review screen access validation


Welcome AMY JONES

Please verify your ability to read and understand English. Type YES and press the ENTER Key.

Ask the screener for assistance if you do not understand the process.

Cancel

**1. (FEMALE DONORS ONLY)**

12-05-2013 11:08	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JONES, AMY  
Address : 123 TEST LANE ALEXANDRIA VA 22305

**Donor Response**

Question Number: 201      Question Code: 201

**Are you pregnant now, or have you been pregnant in the past 6 weeks?**

Answer by clicking on the appropriate "Yes" or "No" button

|

**Phlebotomy Use:**    User ID:     Password:       DN00000023

2.

12-05-2013 11:08	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JONES, AMY  
Address : 123 TEST LANE ALEXANDRIA VA 22305

**Donor Response**

Question Number: 202      Question Code: 202

**Are you feeling well and healthy today?**


          

Answer by clicking on the appropriate "Yes" or "No" button

Phlebotomy Use:    User ID:     Password:       DN0000023

3.

12-05-2013 11:08	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JONES, AMY  
Address : 123 TEST LANE ALEXANDRIA VA 22305

**Donor Response**

Question Number: 203      Question Code: 203

**Have you ever had chest pain, heart disease, or lung disease?**

Answer by clicking on the appropriate "Yes" or "No" button


**Phlebotomy Use:**    User ID:     Password:       DN00000023



4.

12-05-2013 11:08	LifeTrak/Donor -- At BDMS	ONIDNRES	LIFE TRAK®
Rel: 14	RESP: Donor Response	ACA001	
LifeTrak Donor Self Response Screen			
Name : JONES, AMY			
Address : 123 TEST LANE ALEXANDRIA VA 22305			
Donor Response			
Question Number: 204		Question Code: 204	
<b>Have you seen your provider concerning this condition in the past 6 months?</b>			
<input type="button" value="Yes"/> <input type="button" value="No"/> <input type="button" value="Read More"/>			
Answer by clicking on the appropriate "Yes" or "No" button			
<input type="text"/>			
<input type="button" value="Backward"/>		<input type="button" value="Forward"/>	
<input type="button" value="Stop"/>			
Phlebotomy Use:	User ID: <input type="text"/>	Password: <input type="text"/>	DN00000023

5.

12-05-2013 11:08	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JONES, AMY  
Address : 123 TEST LANE ALEXANDRIA VA 22305

**Donor Response**

Question Number: 205      Question Code: 205

**Have you ever had fainting spells, convulsions or seizures?**


          

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN0000023

6.

12-05-2013 11:08	LifeTrak/Donor -- At BDMS	ONIDNRES	
Rel: 14	RESP: Donor Response	ACA001	

LifeTrak Donor Self Response Screen

Name : JONES, AMY  
Address : 123 TEST LANE ALEXANDRIA VA 22305

**Donor Response**

Question Number: 206      Question Code: 206

**Do you have a consult from your Provider?**

Answer by clicking on the appropriate "Yes" or "No" button

**Phlebotomy Use:**    User ID:     Password:       DN00000023

