



**የብሔራዊ ደም ባንክ አገልግሎት**  
**NATIONAL BLOOD BANK SERVICE**

Effective date: October 15/2018

Document number: FRM SOP BDS-04A1

Revision number: 2.3

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Division/service: Blood donor service/Screening unit

**በደም ለጋሾች የሚሞላ መጠይቅ (AMHARIC)**

**በዛሬው ዕለት ደም ለመለገስ ስለመጡ እናመሰግናለን!**

**ልብ ይበሉ፡-እንደ ኤች አይ ቪ/ኤድስ፡ቁጥኝ እና የጉበት ቫይረስ ዓይነት በደም ሊተላለፉ ለሚችሉ በሽታ አምጪ ተሐዋሲያን ተጋልጫለሁ ካሉ እባክዎ ደም አይለግሱ፡፡**

*ለእርስዎም ሆነ ለደም ተቀባዩ እጅግ በጣም ጠቃሚነት ስላለው እባክዎ መረጃዎቹን በአግባቡ ይሙሱ፡፡*

ክፍል1 የደም ለጋሾች/ሻ መለያ:- የደም ለጋሾች/ሻ መለያ ቁጥር \_\_\_\_\_

ጾታ.....የልደት ቀን (ቀን/ወር/ዓ.ም) .....ዕድሜ.....ሥራ:.....

የጋብቻ ሁኔታ :- ያገባ  ያላገባ  ሌላ

**ክፍል2: የጤና ምርመራ መጠይቅ**

ቀጥሎ ያሉትን ጥያቄዎች ሁሉም ደም ለጋሾች ሊሞሏቸው የሚገቡ ሲሆን የመረጃዎቹ ምስጢራዊነት የተጠበቀ ነው፡፡

እባክዎትን ጥያቄዎቹን በጥንቃቄ ያንብቡና በታመኝነት ይመልሱ፡፡

እባክዎትን መልሱን የ “ ✓ ” ምልክት በማድረግ ያመልክቱ፡፡

ተ.ቁ	መጠይቅ	አዎ	አይደለም	ባለመያ
1	በዛሬው ዕለት ጥሩ የጤንነት ስሜት ይሰማዎታል?			
2	ባለፉት 4 ሰዓታት ውስጥ የሚበላ ወይም የሚጠጣ ነገር ወስደዋል?			
3	ደም ለግሰጧ ያወቃል?			
	3.1 አዎ ከሆነ መልስዎ መቼ?			
4	ደም ለመለገስ መጥተው ሳይለግሱ ተመልሰው ያውቃሉ?			
	4.1 አዎ ከሆነ መልስዎ፣ ምክንያቱ ምን ነበር?			
5	ከዚህ ቀጥሎ በተዘረዘሩት የስራ መስኮች ይሰማራሉ?			
	5.1. በሚቀጥሉት 12 ሰዓት ውስጥ በከባድ መኪና ሾፌርነት ወይም የኤሌክትሪክ ሃይል በሚጠቀሙ ማሽኖች ይሰራሉ?			
	5.2. በሚቀጥሉት 72 ሰዓት ውስጥ አውሮፕላን ያበራሉ?			
	5.3. አትሌት ነዎት፣ ከሆኑስ ተከታታይ ልምምድ ያደርጋሉ?			
6	ባለፈው 5 ቀናት ውስጥ አስፕሪን ወሰደዋል?			
7	ባለፈው 2 ሳምንታት ውስጥ እንደአንቲባዮቲክስ አይነት መድኃኒት ወሰደዋል?			
8	ባለፈው 28 ቀናት ውስጥ ክትባት ተከትበው ያውቃሉ?			
9	ባለፈው 4 ሳምንታት ታይፎይድ (Typhoid fever) ታመወ ነበር?			
10	ባለፈው 6 ሳምንታት ውስጥ የተስባሽታ (typhus) ታመወ ነበር?			
11	ባለፈው 6 ወር የወባበሽታ ይዘዎት ያወቃል?			
12	በሚከተሉት በሽታ ታመው ያውቃሉ?			

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ተ.ቁ	መጠይቅ	አዎ	አይደለም	ባለመያ
	12.1 የልብ፣ የደም ዝግጁ ወይም የደም መርጋት ችግር የቀይ ደም ሴል መብዛት/polycythemia/			
	12.2 የኩላሊት፣ የሳንባ፣ የደም ግፊት፣ የሰኳር፣ የሚጥል በሽታ			
	12.3 የጉበት በሽታ ታመው ያውቃሉን (አይኖት ቢጫ ሆኖ ወይም የጉበት በሽታ እንዳልብህ/ሽ ተነግሩህ/ሽ ያቃል?)			
	12.4 በግብረ ስጋ ግንኙነት የሚተላለፉ በሽታ ይዞዎት ያወቃል? (ቁጥኝ፣ ጨብጥና ሌሎችም)			
13	ባለፈው 1 አመት ውስጥ			
	13.1 ደምና የደም ተዋፅኦ መወሰድ፣ ንቅሳት መነቀስ፣ ጆሮ መበሳት ወይም ቆዳ መበሳት፣ የደረቅ መርፌ ህክምና ማድረግ፣ በስራ ቦታ የድንገተኛ መርፌ መወጋት እና የደም መረጨት አጋጥመዎታል?			
	13.2 ከትዳር ጓደኛዎ ወይም ፍቅረኛዎ ውጪ ጥንቃቄ በነደለው ወይም ተጋለጭነት ባለው መልኩ የግብረ ስጋ ግንኙነት ፈጽመዋል?			
	13.3 እርሶዎ ወይም የትዳር ጓደኛዎ ወይም ፍቅረኛዎ አደንዛዥ እጽ ወይም መድሃኒት ይጠቀማሉ?			
	13.4 ኤች አይ ቪ ቫይረስ በደሙ ካለው ሰው እና የጉበት በሽታ ካለው ሰው ጋር የግብረ ስጋ ግንኙነት ፈጽመዋል? (Discordant)			
	13.5 ከባድ የቀይ ጥገና አድርገዋል፣ ወይም ቀጠሮ አለዎት?			
14	ደም ለሌላ ሰው ቢሰጥ ጤናማ ነው ብለው ያስባሉ?			
15	የደምዎን ጤናማነት በተመለከተ ለማወቅና የምክር አገልግሎት ለመቀበል ይፈልጋሉ?			
16	ለሴቶች ብቻ፡-			
	16.1 ነፍሰጡር ነዎት? የእርግዝና ክትትል ሕክምና እየተደረገልዎት ነው?			
	16.2 ባለፈው 6 ወራት የፅንሰ ማቋረጥ ወይም ማስወረድ ገጥሞዎታል?			
	16.3 ጡት በማጥባት ላይ ነዎት?			

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**ክፍል 3: የስምምነት መግለጫ**

- መጠይቆችን እና 'ደሙን የሚለግሱት ለትክክለኛ ምክንያት ነው?' የሚለውን ማብራሪያ አንብቤ ተረድቻለሁ፡፡
- እስከ ማውቀው ድረስ የሰጠሁት መረጃ ትክክል ነው፡፡
- መጠይቁን በትክክለኛውና በታማኝነት ባልሞላ ደም ለሚጠቀሙ ታካሚዎች ጉዳት እንዳለው ተገንዝቤ አለሁ፡፡
- በለገስኩት ደም የቁጥኝ፣ የጉበት በሽታ ቢ(B) ፣ የጉበት በሽታ ሲ(C) እና የኤች አይ ቪ ኤድስ አምጭ ተሐዋስኖን ምርመራ መደረጉ አስፈላጊነቱን ተረድቻለሁ፡፡
- የደም ልገላውን ተግባር ጤናማ ለማድረግ አስከፊ ሰብ ድረስ የደም ናሙና ውጤት ለሳይንሳዊ ምርምር ተግባር እንዲውል ፈቅጃለሁ፡፡
- እድሜዬ ከ18-65 አመት መሆኑን አረጋግጣለሁ፡፡
- በዚህ ቃለ መጠይቅ ላይ የሰጠሁት መረጃ በሚመለከተው አካል ምስጢራዊነቱ በተጠበቀ መልኩ እንደሚቀመጥ ተገንዝቤ አለሁ፡፡

የደም ለጋሽ/ሻ ልገላ መለያ ቁጥር.....(በደም ባንክ ባለሙያ የሚሞላ) ፊርማ .....

አስተያየት፡-.....

የምርመራ አገልግሎት የሰጠው ባለሙያ ስም.....ፊርማ-----ቀን-----

**ለቢሮ አገልግሎት ብቻ**

የምክር አገልግሎት የሰጠው ባለሙያ ስም.....ፊርማ.....

በደም ለጋሽ/ሻ ላይ የታየ ችግር አለ.....የለም.....

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**NATIONAL BLOOD BANK SERVICE**

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Division/service: Blood donor service/Screening unit

**BLOOD DONOR QUESTIONNAIRE**

**IMPORTANT: DO NOT DONATE BLOOD IF YOU MAY HAVE BEEN EXPOSED TO HIV/AIDS, HEPATITIS OR SYPHILIS.**

**PLEASE FILL THIS FORM PROPERLY.**

**SECTION1. Donor Code** \_\_\_\_\_

Sex ..... Date of Birth (DD/MM/YY) ..... Age .....

Marital Status: Single  Married  Others

**SECTION 2. HEALTH QUESTIONNAIRE**

All donors must complete this section. Your answers will be treated confidentially. Please read all questions carefully and answer honestly. Please TICK '✓' your answers.

S.N	Questions	Yes	No	Staff
1	Are you feeling well today?			
2	Have you had something to eat or drink in the last 4 hours?			
3	Have you ever donated blood?			
	3.1 If yes, When?			
4	Have you ever been deferred as a blood donor?			
	4.1 If Yes ,reason for deferral			
5	Are you involved in any of the following activities			
	5.1 Within the next 12 hours, Train or Heavy truck driving ,heavy machine operating?			
	5.2 For the next 72 hours, flying an airplane?			
	5.3 are you an Athlete? if so are you participating in a regular training or athletic programme?			
6	In the past 5 days: have you taken Aspirin?			
7	In the past 2 weeks: have you taken Antibiotics?			
8	In the past 28 days: have you been vaccinated?			
9	In the past 4 weeks: Have you had Typhoid fever?			
10	In the past 6 weeks: Have you had Typhus?			
11	In the past 6 months: have you had Malaria?			
12	Have you ever had:			
	12.1 Heart, circulatory problems, bleeding disorder or polycythemia			
	12.2 kidney, Lung, High blood pressure ,Diabetes, Epilepsy			
	12.3 have you had yellow jaundice,liver disease,or hepatitisB/C?			
	12.4Have you had sexually transmitted disease?(Syphilis,gonorrhea,and others)			
13	In the past one year			
	13.1 Recieved blood or blood products,tattoo,Ear or skin piercing,acupunctured,and accidental needle injury/blood splash?			
	13.2Have you had unsafe sexual intercourse?			
	13.3Have you or your sexual partner ever used recreational, street drugs by nose, mouse or injection needle?			
	13.4have you ever had sexual contact with anyone who has HIV/AIDS or Hepatitis B/C in his/her blood?			

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**BLOOD DONOR QUESTIONNAIRE**

S.N	Questions	Yes	No	Staff
	13.5 Have you had major surgical procedure or, are you scheduled to have surgery?			
14	Do you consider your blood safe to be transfused to a patient?			
15	Do you consent for post blood donation counseling service rendered by the institution?			
16	FOR WOMEN ONLY			
	16.1 Are you pregnant? Have you started antenatal care?			
	16.2 In the past 6 months have you had miscarriage or abortion?			
	16.3 Are you breastfeeding?			

**SECTION 3: DECLARATION**

1. I have read and understood the pamphlet **“Basic Brochure on Blood Donation”**.
2. To the best of my Knowledge all the information supplied is the truth
3. I understand that if I have not answered these questions truthfully this could endanger the patient.
4. I consent to my blood being tested to syphilis, hepatitis B, hepatitis C and HIV.
5. I accept that donation data may be used on occasion for scientific research the objective of which is to improve the safety of the blood supplied to patients and the donors’ health and wellbeing
6. I confirm that I am 18 years of age or older.
7. I understand that all the information on this form will be kept confidentially.

Donor’s Pack Number .....(Filled by Blood Bank Staff)

Donor’s Signature..... Date .....

**Remarks:** .....


Screeener Staff ..... Signature ..... Date .....

**FOR OFFICE USE ONLY**

**Counseled by**.....**Signature** .....

**Donor reaction: YES**.....**NO**.....

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**NATIONAL BLOOD BANK SERVICE**

Effective date: *October 15/2018*

Document number: FRM SOP BDS-04A3

Revision number: 2.3

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Division/service: Blood donor service/Screening unit

**GAAFANNAA ARJOMTOTA DHIIGAA (AFAN OROMO)**

*Guyyaa har'aa Dhiiga Waan Arjoomtaniif isin Galateefanna !*

***HIN DAGATINAA :-*** *Waan akka Vaayirasii HIV, Tiruu , Cophxoo fi dhukkuboota dhiigaan darbuu danda'aniin Faalamtanii jirtan yoo ta'e maaloo! Dhiiga hin Arjoominaa.*

*Isiniifis Ta'ee Yaalamtoota Dhiiga Fudhataniif faayidaa olaanaa waan qabuuf Gaafannaa armaan gadii kana seeraan guutaa.*

*Kutaa 1<sup>ffaa</sup> Saala \_\_\_\_\_ Guyyaa Dhalootaa/ji'a/Bara/ \_\_\_\_\_ Umrii \_\_\_\_\_ Hojii \_\_\_\_\_*

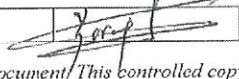
*Haala Gaa'elaa; Fuudhe/Heerume  hin fuune/hin heerumne  kan biroo*

*Kutaa 2<sup>ffaa</sup> .Gaafannaa Qorannoo Fayyaa .*

***Gaaffilee kanatti fufanii argaman Arjoomaan/tuu dhiigaa Haala sirriin guutuu kan qaban yoo ta'u iccitiin isaa kan eegameedha. Maaloo Gaaffilee kana xiyyeeffannaa fi amanamummaan deebii keessan mallattoo kanaan "***  
***√ "guutaa.***

LAKK	GAAFANNAAWWAN	EYYEN	MITI	Oge/Fay yaatin
1	<i>Guyyaa har'aa Miiirri Fayyummaa gaariin isinitti dhaga'amaa ?</i>			
2	<i>Sa'aatti 4 darbe keessatti waan dhugamu ykn nyaatamu fudhattanii jirtuu ?</i>			
3	<i>Dhiiga Arjoomtanii Beektuu?</i>			
	<i>3.1 Deebin keessan Eeyyen yoo ta'eyoom arjoomtan ?</i>			
4	<i>Dhiiga arjoomuf dhufanii osoo hin arjoomin deebitanii beektuu ?</i>			
	<i>4.1 Deebin keessan Eeyyen yoo ta'e Sababiin maal turee ?</i>			
5	<i>Hojiilee Armaan Gadiitti Tarraa'an irratti ni Hirmaattuu?</i>			
	<i>5.1 Sa'aatii 12 dhufu keessatti konko.guddaa /meeshaa eelektirikaa cimoo irra ni hojjattuu ?</i>			
	<i>5.2 Sa'aatii 72 dhufu keessatti Xayyaaran ni Balaliituu/deemtuu ?</i>			
	<i>5.3 Atileetidhaa ? Yoo taatan walitti fufiinsaan shaakallii gootuu ?</i>			
6	<i>Guyyoota 5 darban keessatti Qoricha Aspiriinii fudhattanii jirtuu?</i>			
7	<i>Torbee 2 darbe keessatti Qoricha Antiibaayootiksii Fudhattanii beektuu?</i>			
8	<i>Guyyoota 28 darban keessatti Talaallii talaalamtanii beektuu ?</i>			
9	<i>Torban 4 darbe keessatti Taayifooyidiin (Typhoid Fever) dhukkubsattanii beektuu ?</i>			
10	<i>Torban 6 darban keessatti dhibee daddarboo (Typhus) dhukkubsattanii beektuu ?</i>			
11	<i>Ji'oota 6 darban keessatti dhukkuba Busaatin Qabamtanii beektuu ?</i>			
12	<i>Dhibeewwan Armaan Gaditti ibsaman dhukkubsattanii /Qabamtanii/ beektuu?</i>			
	<i>12.1 Dhibee Onnee, Ittiita Dhiigaa ykn baay'ina dhiigaa (polycythemia) isin qunnamee beekaa?</i>			
	<i>12.2 Dhibeewwan (kalee, Sombaa, dhiibbaa dhiigaa fi Gaggabdo) dhukkubsattanii beektuu?</i>			
	<i>12.3 Dhibee Tiruu dhukkubsattan ykn ijji keessan keelloo /Boora ta'ee beekaa?</i>			

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**NATIONAL BLOOD BANK SERVICE**

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Division/service: Blood donor service/Screening unit

**GAAFANNA ARJOMTOTA DHIIGAA (AFAN OROMO)**

LAKK.	GAAFANNAWWAN	EEYYEN	MITI	Oge/Fayyaattin
	12.4 Dhibeewwan Wal-Qunnamtii Saalaatiin darban kan akka (Fanxoo, Cophxoo fi kkf) niin qabamtanii beektuu?			
13	Waggaa 1 darbe keessatti			
	13.1 Dhiiga fi Bu'aalee dhiigaa fudhatanii, Tuumattaa, Gurra qaawweffatanii ykn haaxaroo haaxaratan, lime gogduun tumattanii beektuu?			
	13.2 Ga'ila keessaniin ala qunnamtii saalaa daangaa hin qabne raawwattanii beektuu?			
	13.3 Isin ykn Hiriyaan ga'ila keessanii Baala sammuu hadoochu fayyadamtanii beektuu?			
	13.4 Nama Dhukkuba HIV/AIDS qabu wajjiin wal qunnamtii saalaa raawwattanii beektuu?			
	13.5 Baqaqsan ii Yaaluu (MS) olaanaa taatanii YKN beellamamtanii jirtuu?			
14	Dhiigni keessan Nama birootiif yoo kenname Fayya qabeessa jettanii yaadduu?			
15	Fayyummaa dhiiga keessanii baruuf tajajila gorsaa waajjirichaan kennamu argachuu barbaadduu?			
16	Dubartoota Qofaaf			
	16.1 Ulfa qabduu? Hordoffiin Ulfaa isiniif taasifamaa jiraa?			
	16.2 Ji'oota 6 darban keessatti Ulfa addaan kutuu YKN Ulfa baasisuu isin Mudatee jiraa?			
	16.3 Harma ni hoosistuu?			

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**KUTAA 3<sup>FFaa</sup> Ibsa Walii galtee**

- 8) Gaafannaawwaniiif Dhiiga kan Arjooman sababa sirriidhaaf Kan jedhu dubbisee hubadheera.
- 9) Hangan beekutti ragaan kenne kun sirriidha.
- 10) Gaafannaawwaniiif deebii Sirrii fi amantummaan yoon guutuu baadhe dhukkubsataa dhiigni kennamuuf miidhuu isaa hubadheera
- 11) Dhiiga Arjoomerratti dhibeewwan (Fanxoo, Dhibee Tiruu "B fi C." dhibee HIV/AIDS) dhukkuboota fidan Qorannoo taasifamu barbaachisummaasaa hubadheera.
- 12) Arjoomina dhiigaa Fayyummaa fi faayida qabeessa tasiisuuf bakka yaadameetti Saamuudaa dhiigaa koottif bu'aalee qoraannoo Saayinsaawwaaf akka olu heeyyamee jira.
- 13) Umriin Koo Waggaa 18 -65 ta'uu kiyya Mirkaneesseera
- 14) Ragaawwan asiin olitti kenne kana qaama dhimmi ilaalun iccitiin isaa eegamee akka kaayamu hubadheera.

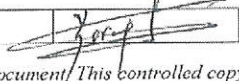
Lakkoofsa Arjoomaa/tuu Dhiigaa \_\_\_\_\_ (Ogeessa Baankii Dhiigaatin kan guutamuu)  
Mallattoo \_\_\_\_\_

Yaada :- \_\_\_\_\_  
Maqaa Ogeessa Tajaajila Qorannoo Gaggessee/ kennee \_\_\_\_\_ Mallattoo \_\_\_\_\_ Guyyaa \_\_\_\_\_

**Tajaajila Biiroo Qofaaf:**

Maqaa Ogeessa Tajaajila Gorsa kennee \_\_\_\_\_ Mallattoo \_\_\_\_\_

Rakkoon Arjoomaa/tuu dhiigaa irratti muldhate:- jira \_\_\_\_\_ -hin jiru \_\_\_\_\_

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