Colour key								
	Minimum requirements as set out in Directive 2004/23/EC							
	More stringent testing - legally binding on national level							
	More stringent testing - recommended on national level							
	Not legally binding and not recommended on national level							

### Non-reproductive tissues and cells

Tested pathogen	Donor test/ technique	Legally binding	Recommended	Recommending	Circumstances for appli	cation		Regional differences	Further comments
rested patriogen	zonor testy testinique		on national level	authority/ association	Donor profile	Tissue/cell type	Comments	negional amerences	
VIRAL			•						
HIV 1 and HIV 2	Anti-HIV 1	YES	NO	NA	all	all	No Comments	NO	If a living donor sample, taken a
	Anti-HIV 2	YES	NO	NA	all	all	No Comments		the time of donation or within
	HIV 1p24							1	day post donation is additionaly
	HIV NAT	YES	NO	NA	deceased donors	all	No Comments	1	tested by the nucleic acid
	Other technique								amplification technique (NAT), i
Hepatitis B	HBs Ag	YES	NO	NA	all	all	No Comments	NO	If a living donor sample, taken a
	Anti-HBc	YES	NO	NA	all	all	No Comments	1	the time of donation or within
	Anti - HBs							1	day post donation is additionaly
	HBV NAT	YES	NO	NA	deceased donors	all	No Comments		tested by the nucleic acid
	Other technique								amplification technique (NAT), i
Hepatitis C	Anti-HCV	YES	NO	NA	all	all	No Comments	NO	If a living donor sample, taken at the time of donation or within 7
•	HCV NAT	YES	NO	NA	deceased donors	all	No Comments		
1	Other technique		•	•	•	•		1	day post donation is additionaly
HTLV-1	Technique not specified  Anti-HTLV-1	YES	NO NO	N/A	donors with risk for HTLV-1 infection  donors living in or originating from a high prevalence area, or parents or sexual partners originating from those areas	all	after assessment of donor's history, in donors/ partners/ parents living, originating from area with high prevalence of HTLV-1	NO	
I	HTLV-1 NAT						_		
	Other technique								
HTLV-2									
Chikungunya virus				1	_	1		1	
Cytomegalovirus	Technique not specified	YES	NO	NA	donors with risk for CMV infection	all	after assessment of donor's history CMV testing must be performed, if appropriate	No	

Tested pathogen	Donor test/ technique		Recommended		Circumstances for app		Regional differences	Further comments	
			on national level		Donor profile	Tissue/cell type	Comments		
	Anti-CMV								
	CMV NAT								
	Other technique								
Dengue Virus									
Ebola Virus									
Epstein-Barr virus	Technique not specified	YES	NO	NA	donors with risk for EBV infection	all	after assessment of donor's history EBV testing must be performed, if appropriate	No	
	Anti-EBV	_							
	Other technique								
Hepatitis E									
Human Parvovirus B19									
Herpes simplex virus									
West Nile Virus									
specify pathogen									
PARASITIC									
Babesiosis									
eishmaniasis.									
Malaria	Technique not specified	YES	NO	NA	donors with risk for malaria	all	after assessment of donor's history testing for malaria must be performed, if appropriate	No	
	Microscopy								
	Plasmodium sp . Ab								
	Plasmodium sp . Ag								
	Plasmodium sp. Ag - rapid test	t l							
	Plasmodium sp. NAT								
	Other technique								
Toxoplasmosis									
Trypanosomiasis	Technique not specified	YES	NO	NA	donors with risk for trypanosomiasis	all	after assessment of donor's history testing for Trypanosomiasis must be performed, if appropriate	No	
	Anti- <i>Trypanosoma cruzi</i>				•	•	•		
	Microscopy								
	Other technique								
pecify pathogen									•
BACTERIAL									
Treponema pallidum (Syphilis)	Technique not specified	YES	NO	NA	all	all	No Comments	No	
эургинэ)									I

Tested pathogen	Donor test/ technique	Legally binding			Circumstances for a	pplication	Regional differences	Further comments	
, ,					Donor profile	Tissue/cell type	Comments	1	
	Anti-T. pallidum		•		•		•		
	Microscopy								
	T. pallidum NAT								
	Other technique								
Chlamydia trachomatis		•						•	
Neisseria gonorrhoeae									
rucellosis									
uberculosis									
Q-fever									
pecify pathogen									
FUNGI									
pecify pathogen									
<b>Fransmissible</b>									
spongiform									
encephalopathies									
Other Tests									
ABO blood group									
esting									
RhD blood group testing	RhD typing	YES	NO	NA	See Comments	See comments	after assessment of donor's history and properties of donated tissues or cells RhD testing must be performed, if appropriate	No	
	Other technique								
HLA testing	Technique not specified	YES	NO	NA	See Comments	See comments	after assessment of donor's history and properties of donated tissues or cells HLA testing must be performed, if appropriate	No	
	HLA Ab HLA Ag HLA gene Other technique	_							
Genetic testing, please specify condition									

Colour key								
Minimum requirements as set out in Directive 2004/23/EC								
	More stringent testing - legally binding on national level							
	More stringent testing - recommended on national level							
	Not legally binding and not recommended on national level							

### Reproductive tissues and cells

Tested pathogen	Donor test/ technique	Legally binding	Recommended	Recommending	Circumstances for appl	cation		Regional differences	Further comments
			on national level	authority/ association	Donor profile	Tissue/cell type	Comments		
VIRAL		•							
HIV 1 and HIV 2	Anti-HIV 1	YES	NO	NA	all	all	No comments	NO	
	Anti-HIV 2	YES	NO	NA	all	all	No comments		
	HIV 1p24		1	1					
	HIV NAT								
	Other technique								
Hepatitis B	HBs Ag	YES	NO	NA	all	all	No comments	NO	
·	Anti-HBc	YES	NO	NA	all	all	No comments		
	Anti - HBs								
	HBV NAT								
	Other technique								
Hepatitis C	Anti-HCV	YES	NO	NA	all	all	No comments	NO	
	HCV NAT								
	Other technique								
HTLV-1	Technique not specified	YES	NO	NA	donors with risk for HTLV-1 infection	all	after assessment of donor's history, in donors/ partners/ parents living, originating from aerea with high prevalence of HTLV-1	NO	
	Anti-HTLV-1 HTLV-1 NAT	YES	NO	N/A	donors living in or originating from a high prevalence area, or parents or sexual partners originating from those areas	all			
	Other technique								
HTLV-2									
Chikungunya virus			1	T	T	1	T	1	
Cytomegalovirus	Technique not specified	YES	NO	NA	donors with risk for CMV	all	only after assessment of donor's history	NO	
	Anti-CMV								
	CMV NAT								
	Other technique								

Tested pathogen	Donor test/ technique	Legally binding		Recommending	Circumstances for appl		T-	Regional differences	Further comments
			on national level	authority/ association	Donor profile	Tissue/cell type	Comments		
engue Virus									
bola Virus									
Epstein-Barr virus	Technique not specified	YES	NO	NA	donors with risk for EBV infection	NA	after assessment of donor's history EBV testing should/must be performed, if appropriate (must should be used in case of a YES in the legally binding column)	NO	
	Anti-EBV								
	Other technique								
Hepatitis E	·								
Human Parvovirus B19									
Herpes simplex virus									
West Nile Virus									
specify pathogen									
PARASITIC									
Babesiosis									
eishmaniasis									
Malaria									
Toxoplasmosis									
Trypanosomiasis	Technique not specified	YES	NO	NA	donors with risk for Trypanosomiasis	all	after assessment of donor's history testing for Trypanosomiasis must be performed, if appropriate	NO	
	Anti- <i>Trypanosoma cruzi</i>		•			<b>'</b>			
	Microscopy								
	Other technique								
specify pathogen									
BACTERIAL									
	Technique not specified	YES	NO	NA	for non-partner donations only	all	No comments	NO	
•	Anti-T. pallidum								
	Microscopy								
	T. pallidum NAT								
	Other technique								
hlamydia trachomatis	Technique not specified							NO	
	C. trachomatis DFA								
	C. trachomatis EIA								

Tested pathogen	Donor test/ technique	Legally binding	Recommended	Recommending	Circumstances for application			Regional differences	Further comments
resteu putilogen	Donor test, testinique	zegan, amang	on national level		Donor profile		Comments	negional amerences	Tartifer comments
	C. trachomatis NAT	YES	NO		sperm donors, non-		NAT testing must be		
					partners		done on urine samples		
					•		·		
	Culture								
	Other technique								
Neisseria gonorrhoeae									
Brucellosis									
Tuberculosis									
Q-fever									
specify pathogen									
FUNGI									
specify pathogen									
Transmissible									
spongiform									
encephalopathies									
Other Tests									
ABO blood group									
testing									
RhD blood group testing	RhD typing	YES	NO	NA	all		in some circumstances (depending on donor's history, exposure, properties or donated tissues and cells) RhD testing must be performed, if appropriate	NO	
	Other technique								
HLA testing									For non-northead designs ART
Genetic testing, please specify condition									For non-partner donors, ART establishments usually perform genetic screening for the presence of autosomal recessive genes known to be the dominant in donor's ethnic background and risk assessment for transmission of inherited conditions known and present in the family