

Netherlands - More stringent blood donor testing requirements 2015 Mapping exercise

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 on national level	Recommending authority/ association	Circumstances for application			Regional differences	Further comments
					Donor profile	Tissue/cell type	Comments		
VIRAL									
HIV 1 and HIV 2	Anti-HIV 1	YES	NO	N/A	all	all	no comments	NO	no comments
	Anti-HIV 2	YES	NO	N/A	all	all	no comments		
	HIV 1p24								
	HIV NAT								
	Other technique								
Hepatitis B	HBs Ag	YES	NO	N/A	all	all	no comments	NO	no comments
	Anti-HBc	YES	NO	N/A	all	all	no comments		
	Anti - HBs								
	HBV NAT								
	Other technique								
Hepatitis C	Anti-HCV	YES	NO	N/A	all	all	no comments	NO	no comments
	HCV NAT								
	Other technique								
HTLV-1	Technique not specified	YES	NO	N/A	donor origin	all	no comments	NO	no comments
	Anti-HTLV-1	YES	NO	N/A	donors living in or originating from a high prevalence area, or parents or sexual partners originating from those areas	all			
	HTLV-1 NAT								
	Other technique								
HTLV-2									
Chikungunya virus									
Cytomegalovirus									
Dengue Virus									
Ebola Virus									
Epstein-Barr virus									
Hepatitis E									
Human Parvovirus B19									
Herpes simplex virus									
West Nile Virus									
specify pathogen									
PARASITIC									
Babesiosis									

Netherlands - More stringent blood donor testing requirements 2015 Mapping exercise

Tested pathogen	Donor test/ technique	Legally binding	Recommended on national level	Recommending authority/ association	Circumstances for application			Regional differences	Further comments
					Donor profile	Tissue/cell type	Comments		
Leishmaniasis									
Malaria									
Toxoplasmosis									
Trypanosomiasis									
specify pathogen									
BACTERIAL									
<i>Treponema pallidum</i> (Syphilis)	Technique not specified	YES	NO	N/A	all	all	no comments	NO	no comments
	Anti- <i>T. pallidum</i>								
	Microscopy								
	<i>T. pallidum</i> NAT								
Other technique									
<i>Chlamydia trachomatis</i>									
<i>Neisseria gonorrhoeae</i>									
Brucellosis									
Tuberculosis									
Q-fever									
specify pathogen									
FUNGI									
specify pathogen									
Transmissible spongiform									
Other Tests									
ABO blood group testing									
RhD blood group testing									
HLA testing	Technique not specified	NO	YES	Eur.Eye Bank Ass.; JACIE / NetCordFACT	On advice of the local transplant-coordinator	cornea's, stemcells	no comments	NO	no comments
	HLA Ab								
	HLA Ag								
	HLA gene								
Other technique									
Genetic testing, please specify condition									

Netherlands - More stringent blood donor testing requirements 2015 Mapping exercise

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 on national level	Recommending authority/ association	Circumstances for application			Regional differences	Further comments	
					Donor profile	Tissue/cell type	Comments			
VIRAL										
HIV 1 and HIV 2	Anti-HIV 1	YES	NO	N/A	partner donation (not direct use), non-partner donation	all	N/A	NO		
	Anti-HIV 2	YES	NO	N/A	partner donation (not direct use), non-partner donation	all	N/A			
	HIV 1p24									
	HIV NAT									
	Other technique									
Hepatitis B	HBs Ag	YES	NO	N/A	all [partner donation (not direct use), non-partner donation]	all	N/A	NO		
	Anti-HBc	YES	NO	N/A	all [partner donation (not direct use), non-partner donation]	all	N/A			
	Anti - HBs									
	HBV NAT									
	Other technique									
Hepatitis C	Anti-HCV	YES	NO	N/A	all [partner donation (not direct use), non-partner donation]	all	N/A	NO		
	HCV NAT									
	Other technique									

Netherlands - More stringent blood donor testing requirements 2015 Mapping exercise

Tested pathogen	Donor test/ technique	Legally binding	Recommended on national level	Recommending authority/ association	Circumstances for application			Regional differences	Further comments	
					Donor profile	Tissue/cell type	Comments			
HTLV-1	Technique not specified	YES	NO	N/A	all [partner donation (not direct use), non-partner donation], but only for cases when the donor/the donor's sexual partner/parents of the donor are living or born in an area with a high prevalence for HTLV	all	N/A	NO		
	Anti-HTLV-1	YES	NO	N/A	donors living in or originating from a high prevalence area, or parents or sexual partners originating from those areas	all				
	HTLV-1 NAT Other technique									
HTLV-2										
Chikungunya virus										
Cytomegalovirus										
Dengue Virus										
Ebola Virus										
Epstein-Barr virus										
Hepatitis E										
Human Parvovirus B19										
Herpes simplex virus										
West Nile Virus										
specify pathogen										
PARASITIC										
Babesiosis										
Leishmaniasis										
Malaria										
Toxoplasmosis										
Trypanosomiasis										
specify pathogen										
BACTERIAL										
<i>Treponema pallidum</i> (Syphilis)	Technique not specified	YES	NO	N/A	non-partner donation	all	no comments	NO		
	Anti- <i>T. pallidum</i>									
	Microscopy									
	<i>T. pallidum</i> NAT Other technique									
<i>Chlamydia trachomatis</i>	Technique not specified								NO	

Netherlands - More stringent blood donor testing requirements 2015 Mapping exercise

Tested pathogen	Donor test/ technique	Legally binding	Recommended on national level	Recommending authority/ association	Circumstances for application			Regional differences	Further comments
					Donor profile	Tissue/cell type	Comments		
	<i>C. trachomatis</i> DFA								
	<i>C. trachomatis</i> EIA								
	<i>C. trachomatis</i> NAT	YES	NO	N/A	non-partner donation	all	no comments		
	Culture								
	Other technique								
<i>Neisseria gonorrhoeae</i>									
Brucellosis									
Tuberculosis									
Q-fever									
specify pathogen									
FUNGI									
specify pathogen									
Transmissible spongiform									
Other Tests									
ABO blood group									
RhD blood group									
HLA testing									
Genetic testing, please specify condition	Specify technique	YES	NO	N/A	selected donor based on ethnic and family background	all	no comments	NO	