## Cyprus - More stringent blood donor testing requirements 2015 Mapping exercise

Colour key	
	Minimum requirements as set out in the 2004/33/EC Directive
	More stringent testing - legally binding on national level
	More stringent testing - recommended on national level
	Not legally binding and not recommended on national level

Test	Test/ technique	Legally binding	Recommendation on national level	Recommending authority/ service/ association	Type of blood donation (blood for transfection of plasma for fractionantion)	Circumstances for application/ donor profile	Regional differences	Further comments
Basic testing								
Blood group testing	AB0 typing	YES	YES	Cyprus Ministry of Health	whole blood/ blood components for transfusion	Only for the first two collections.	NO	<u>General note:</u> For all infections mentioned in this questionnaire, our
	RhD typing	YES	YES	Cyprus Ministry of Health	whole blood/ blood components for transfusion	Only for the first two collections.	NO	medical staff is trying to evaluate possible risks, during the interview of the
	Other, please specify (Kell etc.)	YES	NO	N/A	whole blood/ blood components for transfusion	Kell is tested the first two times of collection. DAT is tested for every collection. The antigens are tested upon request.	NO	blood donor and the use of a specially designed questionnaire
HLA testing							1	
Disease testing								
VIRAL	1							
HIV 1 and HIV 2	Anti-HIV 1 Anti-HIV 2 HIV 1p24 HIV NAT pool or ID HIV NAT ID	YES YES YES	YES YES NO	Cyprus Ministry of Health Cyprus Ministry of Health N/A	whole blood/ blood whole blood/ blood whole blood/ blood	All donations All donations All donations	NO	
	Other technique	-	1	1		1		
Hepatitis B	HBs Ag Anti-HBc Anti - HBs HBV NAT pool or ID	YES YES YES	YES NO NO	Cyprus Ministry of Health N/A N/A	whole blood/ blood whole blood/ blood whole blood/ blood	All donations This test is This test is	NO	
	HBV NAT ID Other technique	-						
Hepatitis C	Anti-HCV HCV NAT pool or ID HCV NAT ID Other technique	YES 	YES	Cyprus Ministry of Health	whole blood/ blood	All donations	NO	
Hepatitis E								
HTLV-1 HTLV-2								
Ebola Virus								During the interview of the blood donor from our medical staff details are gathered regarding the areas the blood donor visited and the period of his visit excluding therefore those who visited hot zones.
Chikungunya virus								During the interview of the blood donor from our medical staff details are gathered regarding the areas the blood donor visited and the period of his visit excluding therefore those who visited hot zones.
Cytomegalovirus	CMV/ technique not						NO	
	specified Anti-CMV	YES	NO	N/A	whole blood/ blood components for	Upon request		
	CMV NAT pool or ID CMV NAT ID Other technique	-			transfusion			
West Nile Virus*								During the interview of the blood donor from our medical staff details are gathered regarding the areas the blood donor visited and the period of his visit excluding therefore those who visited hot zones.

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Dengue Virus								During the interview of the blood donor from our medical staff details are gathered regarding the areas the blood donor visited and the period of his visit excluding therefore those who visited hot zones.
Epstein-Barr virus								
Human Parvovirus B19								
Herpes simplex virus								
Nonspecific viral infection								
Other pathogen, specify								
PARASITIC								
Malaria								During the interview of the blood donor from our medical staff details are gathered regarding the areas the blood donor visited and the period of his visit excluding therefore those who visited hot zones.
Trypanosomiasis								
Babesiosis Leishmaniasis								
Toxoplasmosis								
Other pathogen, specify								
BACTERIAL								
Treponema pallidum (Syphilis)	Technique not specified Microscopy Anti-T. pallidum	YES	NO	N/A	whole blood/ blood	All donations	NO	
					components for transfusion	Andonations	-	
	T. pallidum NAT pool T. pallidum NAT ID Culture Other technique							
Neisseria Brucellosis								
Tuberculosis								
Q-fever Other pathogen,								
specify FUNGI								
specify pathogen								

For West Nile Virus NAT ID, see 2004/33/EC as amended by 2014/110/EU with a deadline for transposition into national law of December 31, 2015

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