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		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	NO	all	all		NO	
	Anti-HIV 2	YES	NO	NO	all	all			
	HIV 1p24	YES	NO	NO	all	all	no comments		
	HIV NAT								
	Other technique								
Hepatitis B	HBs Ag	YES	NO	NO	all	all		NO	
	Anti-HBc	YES	NO	NO	all	all			
	Anti - HBs	YES	NO	NO	all	all	no comments		
	HBV NAT	YES	NO	NO	deceased	all	no comments		
	Other technique								
Hepatitis C	Anti-HCV	YES	NO	NO	all	all		NO	
	HCV NAT	YES	NO	NO	deceased	all	no comments		
	Other technique								
HTLV-1	Technique not specified		NO						
	Anti-HTLV-1	YES	NO	NO	all except HPC	all except HPC	mandatory for		
							deceased, but for		
							living - only in case the		
							donor or his parents		
							come from a country		
							with a high prevalence area and mandatory		
							only in a certain region		
							where it occurs		
	HTLV-1 NAT							1	
	Other technique								
HTLV-2	Technique not specified							NO	

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Tested pathogen	Donor test/ technique	Legally binding	Recommended on national level	Recommending authority/association	Circumstances for a	pplication		Regional differences	Further comments
					Donor profile	Tissue/cell type	Comments	-	
	Anti-HTLV-2	YES	NO	NO	all except HPC	all except HPC	mandatory for deceased, but for living - only in case the donor or his parents come from a country with a high prevalence area and mandatory only in a certain region where it occurs		
	HTLV-2 NAT								
	Other technique								
Chikungunya virus									
Cytomegalovirus	Technique not specified			-				NO	
	Anti-CMV	YES	NO	NO	all	all	no comments		
	CMV NAT	_							
Deres all'est	Other technique								
Dengue Virus									
Ebola Virus									I
Epstein-Barr virus	Technique not specified	NEC.	- NO	luo	E.u.	E-u		NO	
	Anti-EBV Other technique	YES	NO	NO	all	all	no comments	-	
Hepatitis E	Other technique								
Human Parvovirus B19									
Herpes simplex virus									
West Nile Virus									
specify pathogen									
PARASITIC									
Babesiosis									
Leishmaniasis									
Malaria									
Toxoplasmosis	Technique not specified							NO	
10000103110313	Anti-Toxoplasma gondii	YES	NO	NO	all	all	no comments		
	Microscopy			1					
	Other technique								
Trypanosomiasis									
specify pathogen									
BACTERIAL									
Treponema pallidum (Syphilis)	Technique not specified	YES	NO	NO	all donors except married couples	all		NO	
	Anti-T. pallidum	YES	NO	NO	all	all	no comments]	
	Microscopy							_	
	T. pallidum NAT	YES	NO	NO	all	all	no comments	4	
	Other technique								

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Tested pathogen	Donor test/ technique	Legally binding		Recommending authority/ association	Circumstances for application			Regional differences	Further comments
					Donor profile	Tissue/cell type	Comments		
Chlamydia trachomatis					· · ·	· · · · ·			
Neisseria gonorrhoeae									
Brucellosis									
Tuberculosis									
Q-fever									
specify pathogen									
FUNGI									
specify pathogen									
Transmissible spongiform									
encephalopathies									
Other Tests	1	Ĩ		1	1	1	1	1	
ABO blood group testing		YES	NO	NO	all	all	no comments	NO	
	Other technique								
RhD blood group testing	RhD typing	YES	NO	NO	all	all	no comments	NO	
	Other technique								
HLA testing	Technique not specified							NO	
	HLA Ab			-					
	HLA Ag	YES	NO	NO	only HPC	only HPC	no comments		
	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/	Logally binding	Recommended on	-	Circumstances for application	Regional differences	Further service sta		
rested pathogen		Legally binding	national level		Circumstances for application	T (11)		Regional differences	Further comments
	technique		hational level	association	Donor profile	Tissue/cell type	Comments		
VIRAL									
HIV 1 and HIV 2	Anti-HIV 1	YES	NO	NO	married couple	all		NO	
	Anti-HIV 2	YES	NO	NO	married couple	all	no comments		
	HIV 1p24		•	•	• •				
	HIV NAT								
	Other technique								
lepatitis B	HBs Ag	YES	NO	NO	married couple	all		NO	
	Anti-HBc	YES	NO	NO	married couple	all	no comments		
	Anti - HBs		•		•				
	HBV NAT								
	Other technique								
lepatitis C	Anti-HCV	YES	NO	NO	married couple	all	no comments	NO	
	HCV NAT			1				-	
	Other technique								
HTLV-1	Technique not		NO						
	specified								
	Anti-HTLV-1	YES	NO	NO	married couple	all	in case the donor or his parents		
	/	120				un	come from a country with a high		
							prevalence area and mandatory		
							only in a certain region where it		
							occurs		
							occurs		
	HTLV-1 NAT			1					
	Other technique	-							
	Other technique								
HTLV-2									
Chikungunya virus				Lu-		1.4			1
Cytomegalovirus	Technique not	YES	NO	NO	only married women	all	no comments	NO	
	specified								
	Anti-CMV	_							
	CMV NAT								
	Other technique								
Dengue Virus									
bola Virus									
pstein-Barr virus									
lepatitis E									
luman Parvovirus B19									
lerpes simplex virus									
Vest Nile Virus									
pecify pathogen									
PARASITIC									
abesiosis									
eishmaniasis									
Valaria									
laiaiid									

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Tested pathogen	Donor test/	Legally binding	Recommended on	Recommending authority/	Circumstances for application	Regional differences	Further comments		
	technique	8,8	national level	association	Donor profile	Tissue/cell type	Comments		
Toxoplasmosis	Technique not							NO	
	specified								
	Anti-Toxoplasma	YES	NO	NO	only married women	all	no comments		
	gondii								
	Microscopy								
	Other technique								
Trypanosomiasis									
specify pathogen									
BACTERIAL									
Treponema pallidum	Technique not	YES	NO	NO	all donors except married couples	all		NO	
(Syphilis)	specified								
	Anti-T. pallidum					•	•		
	Microscopy]							
	T. pallidum NAT								
	Other technique								
Chlamydia trachomatis	Technique not							NO	
	specified								
	C. trachomatis DFA								
	C. trachomatis EIA								
	C. trachomatis NAT	YES	NO	N/A	all sperm donors except partners	sperm	mandatory for all sperm donors except partners		
	Culture						· · ·		
	Other technique								
Neisseria gonorrhoeae								•	
Brucellosis									
Tuberculosis									
Q-fever									
specify pathogen									
FUNGI									
specify pathogen									
Transmissible									
spongiform									
encephalopathies									
Other Tests									
ABO blood group	ABO typing	YES	NO	NO	married couple	all	no comments	NO	
testing	Other technique		_						
RhD blood group	RhD typing	YES	NO	NO	married couple	all	no comments	NO	
testing	Other technique								
HLA testing									
Genetic testing, please									
specify condition									