Thank you for your generous gift of bone marrow, and for all the time and effort you have put in as a donor. Now, it is time to take care of yourself.

This handout explains self-care instructions after donating bone marrow for the National Marrow Donor Program (NMDP).

Follow-up

- After your donation, you will not need to return to the clinic unless you have concerns or your doctor asks you to make a follow-up appointment.
- If you are not feeling well the morning after your donation, call 206-288-7600 and ask to talk with a nurse.

If you have any other questions, call:

- Your NMDP Donor Center Coordinator at the Puget Sound Blood Center: 206-292-1837
- Seattle Cancer Care Alliance (SCCA) at 206-288-7600:
  - Weekdays from 8 a.m. to 10 p.m.
  - Weekends from 8 a.m. to 6 p.m.
  - Holidays from 8 a.m. to 5 p.m.
- Dr. Michael Linenberger, Collection Center Director, SCCA:
  - Office: 206-288-2038
  - Pager: 206-559-1624

What to Expect

It is normal for the puncture wounds to weep (be moist) for at least 1 to 2 days. The wounds should scab over 3 to 4 days after marrow is collected.
For 1 to 2 weeks after your donation, it is normal to have:

- Pain
- Stiffness
- Tiredness
- A low fever

You may also have some hardness in the area where bone marrow was collected. This hardness will take a few weeks to go away.

**When to Call Your Doctor**

Call your doctor if you have:

- A fever higher than 100.5°F (38°C)
- Any signs of infection at the collection site:
  - Redness
  - Bleeding
  - Swelling
  - Drainage from the puncture wounds that does not stop after 3 to 4 days
- Muscle weakness (within 2 weeks of your donation)
- Severe headache (within 2 weeks of your donation)
- Pain that lasts longer than 14 days after your donation

**Call 9-1-1 or go to the emergency room right away if you have a life-threatening emergency.** Bring this handout with you.

**Pain Medicines**

The soreness at the puncture sites should lessen each day. It should go away in about 1 to 2 weeks. To help ease discomfort:

- Take your pain medicine as prescribed.
- Do not take aspirin or aspirin-like products for 1 week after your donation, unless your doctor tells you it is OK. This includes ibuprofen (Advil, Motrin) and naproxen (Aleve, Naprosyn). These products can keep your blood from clotting.

Please call your doctor if:

- The medicine does not ease your pain.
- Your pain is getting worse.
- You need a refill of your pain medicine prescription.
Care of Collection Sites

- The night after your donation:
  - Keep the collection sites dry.
  - Place cold packs on the sites for 20 to 30 minutes at a time, every 2 to 3 hours.
- Check the collection sites every day for bleeding or increased redness.
- 24 hours after your donation:
  - Remove the bandages and replace them with an adhesive bandage. Getting the bandages very wet in a warm shower will make them easier to take off.
  - You may wish to use an antibacterial ointment, such as Neosporin, on the collection sites before putting the adhesive bandage on.
- Keep your collection sites clean and covered for the next 3 days.
- Clear or pink fluid drainage is normal.
- Do not take a bath, sit in a hot tub, or go swimming until the collection sites are scabbed and dry.
- Put a clean adhesive bandage over the collection site every day after you shower. Blot the area dry with a towel. Do not rub.
- If any of the sites bleed, apply pressure for 5 minutes, then use a cold pack. If the bleeding does not stop after 10 minutes of constant, direct pressure, call one of the numbers on page 1 of this handout.

Activity

- Take several rest periods during the day.
- When sitting, keep your legs raised.
- Keep moving. Walk often to keep from getting stiff.
- If you feel lightheaded or dizzy when you change positions, rest more often.
- When you are away from home, take a small pillow with you to sit on so you will be more comfortable.
- Get plenty of sleep.
Exercise

For the 1st Week:

- Avoid bending and heavy lifting. Do not lift anything that weighs more than 10 pounds (a gallon of milk weighs 8 pounds).
- Avoid exercise such as jogging and contact sports like soccer, football, and others.
- Allow rest time between activities during the day.

Through the 2nd Week:

- Avoid exercise such as jogging and contact sports.

Through the 4th Week:

- Avoid contact sports.

Work and School

- You should be able to return to work, school, and other regular activities within 1 to 7 days.
- If possible, work a half day when you return to work. Increase your hours as you can.
- If your job involves physical labor or heavy lifting, you may need more rest and recovery time.

Diet

On the day of your donation, after your bone marrow has been collected:

- Drink plenty of liquids. Start with soups, broth, and clear juice.
- Add foods as you are able to handle them.

To help your healing and recovery after donation:

- Eat a balanced diet.
- Drink 8 to 10 glasses of water every day.
- Avoid alcohol and caffeine.
- Eat foods that are high in iron, such as green leafy vegetables and red meat. Take vitamin C at the same time that you eat iron-rich foods to increase your body’s ability to absorb the iron.
- Your doctor may prescribe iron supplements. You will receive instructions before you leave the hospital.
Questions?
Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

Seattle Cancer Care Alliance (SCCA):
206-288-7600:
- Weekdays from 8 a.m. to 10 p.m.
- Weekends from 8 a.m. to 6 p.m.
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Other Follow-up
• If you receive a bill related to your donation, call your NMDP Donor Center Coordinator. Do not keep the bill or just put it away.
• Staff from the Donor Center will contact you often until you report that you are fully recovered from your surgery. You will then receive follow-up calls once a year to check on how you are doing.
• Call your Donor Center if you have any questions or concerns. Report any symptoms, even if you have already said you are fully recovered.

I have received and understand the instructions in this handout:
Donor: ___________________________ Date: __________
Witness: ___________________________
Donor’s Agent or Representative: ___________________________