

**Denmark - 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	
	Anti-HIV 2	YES	NO	N/A	all	all			
	HIV 1p24						HIV 1p24 is offered at several testing laboratories and automatically included in the donor screening		
	HIV NAT	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	deceased	all	no comments		
	Other technique								
Hepatitis B	HBs Ag	YES	NO	N/A	all	all		NO	
	Anti-HBc	YES	NO	N/A	all	all			
	Anti - HBs								
	HBV NAT	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	deceased	all	no comments		
	Other technique								
Hepatitis C	Anti-HCV	YES	NO	N/A	all	all		NO	
	HCV NAT	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	deceased	all	no comments		
	Other technique								
HTLV-1	Technique not specified							NO	
	Anti-HTLV-1	YES	NO	N/A	testing must be performed for donors originating from high-prevalence areas or with parents or sexual partners originating from those areas	all	If the donor or his /hers sexual partner or parents originates from an area with high prevalence it is mandatory		

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					Donor profile	Tissue/cell type	Comments		
	HTLV-1 NAT Other technique								
HTLV-2									
Chikungunya virus									
Cytomegalovirus									
Dengue Virus	Technique not specified	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	all	depending on the background of the donor and actual seasonal risks	NO	
Ebola Virus	Technique not specified	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	all	depending on the background of the donor and the actual risk in a country	NO	
Epstein-Barr virus									
Hepatitis E									
Human Parvovirus B19									
Herpes simplex virus									
West Nile Virus	Technique not specified WNV minipool NAT WNV ID NAT Other technique	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	all	depending on the background of the donor and the seasonal risk	NO	
Zika Virus	Technique not specified	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	all	depending on the background of the donor and actual seasonal risks	NO	
PARASITIC									
Babesiosis									
Leishmaniasis									
Malaria									
Toxoplasmosis									
Trypanosomiasis									
specify pathogen									
BACTERIAL									
<i>Treponema pallidum</i> (Syphilis)	Technique not specified	YES	NO	N/A	all	all		NO	

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					Donor profile	Tissue/cell type	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 encephalopathies									
Other Tests									
ABO blood group testing	ABO typing	NO	YES	Danish Haematological Society/ http://www.hematology.dk	allogeneic	HSC	no comments	NO	
	Other technique								
RhD blood group testing	RhD typing	NO	YES	Danish Haematological Society/ http://www.hematology.dk	allogeneic	HSC	And recommended by some ortopedic centres for bone donors	NO	
	Other technique								
HLA testing	Technique not specified	NO	YES	Danish Haematological Society/ http://www.hematology.dk	allogeneic	HSC	no comments	NO	
	HLA Ab								
	HLA Ag								
	HLA gene Other technique								
Genetic testing, please specify condition									

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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	gametes	non-partner sperm donor should be quarantined for 180 days and then retested, if not NAT tested	NO	Testing requirements for eggdonors are the same as for non-partner sperm donors, i.e serological testing and NAT testing are mandatory, since it is not possible to test eggdonors 180 days after donation. Blood samples can be taken up to 30 days before donation. NAT testing for HIV, HBV and HCV is mandatory for egg donors.
	Anti-HIV 2	YES	NO	N/A	all	gametes	non-partner sperm donor should be quarantined for 180 days and then retested, if not NAT tested		
	HIV 1p24						HIV 1p24 is offered on a routine basis at most testing laboratories and automatically included in the donor screening		
	HIV NAT	YES	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	gametes	egg donor mandatory; non-partner sperm donor instead of retesting after 180 days		
	Other technique								
Hepatitis B	HBs Ag	YES	NO	N/A	all	gametes	non-partner donations should be quarantined for 180 days and then retested, if not NAT tested	NO	

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					Donor profile	Tissue/cell type	Comments		
	Anti-HBc	YES	NO	N/A	all	gametes	non-partner donations should be quarantined for 180 days and then retested, if not NAT tested		
	Anti - HBs								
	HBV NAT	YES	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	gametes	egg donor mandatory; non-partner sperm donor instead of retesting after 180 days		
	Other technique								
Hepatitis C	Anti-HCV	YES	NO	N/A	all	gametes	non-partner donations should be quarantined for 180 days and then retested, if not NAT tested	NO	
	HCV NAT	YES	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	gametes	egg donor mandatory; non-partner sperm donor instead of retesting after 180 days		
	Other technique								
HTLV-1	Technique not specified							NO	
	Anti-HTLV-1	YES	NO	N/A	testing must be performed for donors originating from high-prevalence areas or with parents or sexual partners originating from those areas	gametes			
	HTLV-1 NAT								
	Other technique								
HTLV-2									
Chikungunya virus									
Cytomegalovirus									
Dengue Virus	Technique not specified	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	gametes	depending on the background of the donor and the seasonal risks	NO	

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					Donor profile	Tissue/cell type	Comments		
	Anti-DENV NAT Other technique								
Ebola Virus	Technique not specified Anti-EBV Other technique	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	gametes	depending on the background of the donor and the actual risk in a country	NO	
Epstein-Barr virus									
Hepatitis E									
Human Parvovirus B19									
Herpes simplex virus									
West Nile Virus	Technique not specified WNV minipool NAT WNV ID NAT Other technique	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	gametes	depending on the background of the donor and the seasonal risks	NO	
Zika Virus	Technique not specified	NO	YES	Danish Patient Safety Authority/ http://www.stps.dk	all	all	depending on the background of the donor and actual seasonal risks	NO	
PARASITIC									
Babesiosis									
Leishmaniasis									
Malaria									
Toxoplasmosis									
Trypanosomiasis									
specify pathogen									
BACTERIAL									
<i>Treponema pallidum</i> (Syphilis)	Technique not specified Anti- <i>T. pallidum</i> Microscopy <i>T. pallidum</i> NAT Other technique	YES	NO	N/A	non-partner donor	gametes		NO	
<i>Chlamydia trachomatis</i>	Technique not specified <i>C. trachomatis</i> DFA <i>C. trachomatis</i> EIA <i>C. trachomatis</i> NAT Culture	YES	NO	N/A	non-partner donor	sperm		NO	

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					Donor profile	Tissue/cell type	Comments		
	Other technique								
<i>Neisseria gonorrhoeae</i>	Technique not specified	YES	YES	Danish Patient Safety Authority/ http://www.stps.dk	non-partner donor	sperm	no comments	NO	
	<i>N. gonorrhoeae</i> NAT								
	Culture								
	Other technique								
Brucellosis									
Tuberculosis									
Q-fever									
specify pathogen									
FUNGI									
specify pathogen									
Transmissible spongiform encephalopathies									
Other Tests									
ABO blood group testing									
RhD blood group testing									
HLA testing									
Genetic testing, please specify condition	Specify technique	YES	NO	N/A	non-partner donor	sperm	screened for autosomal recessive genes known to be prevalent in the donor's ethnic background	NO	