

102年報

The Taiwan Blood Services Foundation
Annual Report 2013

台灣血液基金會











中華民國總統用牋



親愛的全國父老兄弟姊妹們：

捐血是拯救生命最好的方式，沒有血液就沒有生命，更不會有生命的延續。歷年來，臺灣血液基金會肩負著保障捐血人健康及病人輸血安全之重要使命。

自民國63年臺灣捐血事業成立後即積極推動自願無償捐血運動；80年時國民捐血率首度達到5.18%之國際門檻，之後逐年成長，至100年國民捐血率高達8.13%，充分滿足國內醫療用血需求，也使我國邁入血液事業先進國家之列。102年初捐血機構更增加全面實施B型、C型肝炎及愛滋病等三項病毒核酸擴大檢驗（NAT），有效縮短檢驗空窗期，加強提升血液品質及輸血安全。

103年4月19日是臺灣捐血事業成立40周年，長期以來，捐血事業凝聚捐血人的愛心與力量，從創立時期篳路藍縷到如今已穩定發展；自願無償捐血運動從點、線、面，進而深植到全體民眾心中，是一個成功的社會改革運動。英九謹此向所有熱心捐血人士及推廣捐血運動之社會團體，致上最崇高之敬意與謝忱。

102年1月至11月底共募集血液2,281,976單位，供應各類血品共4,171,169單位，充分滿足醫療用血需要。未來政府和捐血機構將賡續努力，積極提昇血液品質與血品安全。在此，要特別呼籲年輕族群踴躍捐輸，讓捐血救人之義行善舉，生生不息，代代相傳。

每逢歲末年終，農曆春節將至，學校寒假即將到來之時，連續假期遊子返鄉及出國旅遊者增加，各地捐血人數驟減，庫存血量恐將不足。臺灣血液基金會103年辦理之「捐血月」活動將於1月1日至1月31日積極展開，期望全體國人捲起衣袖，踴躍捐血，讓過年期間需要用血之傷病患者不虞匱乏，在此感謝全國民眾熱情響應。

敬祝

新春愉快！

萬事如意！

總統　馬英九

中華民國103年1月1日

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董事長的話　胡惠德

今（102）年全國總捐血量達到 2,490,434 單位（包含全血及分離術捐血），供應各類血品共 4,569,739 單位；國民捐血率達到 7.54%，充分供應全國的醫療用血。根據世界衛生組織（WHO）訂定，各國在輸用紅血球是否達到足夠之最低標準為：每千人口至少要能提供 10 袋紅血球；而本會在 102 年實際提供各醫院之紅血球為：每千人口約 48.5 袋（經換算國際標準單位）。因此，本會在捐供血方面不僅供應無虞，亦可列為血液事業先進國家之林。

為配合國家「國血國用」衛生政策並紓解國內血液製劑短缺情況，本會自 96 年開始收集血漿原料，並分批運至澳洲 CSL 血漿工廠加工製成「國血製劑益康」產品，分別為「人血清白蛋白注射劑」、「人類免疫球蛋白靜脈注射劑」、「第八凝血因子」及「第九凝血因子」等四種血液製劑。除充分供應國內醫療院所輸用外，基於人道救援並妥善運用寶貴的血液資源，本會繼民國 100 年捐贈第八、第九凝血因子 6,111 瓶給世界血友病聯盟（World Federation of Hemophilia）後，101 年及 102 年再分批捐贈第八凝血因子共 5,820 瓶給世界血友病聯盟，並轉贈許多需要的國家。捐血人的愛心不僅嘉惠國人，也廣及世界。

為提升血液品質及輸血安全，本會各捐血中心持續推廣並製備「分離術血小板」，今年供應量達到 224,985 單位，佔全部血小板供應量 89.9%；其中「減除白血球之分離術血小板」佔分離術血小板供應量 27.1%，較去（101）年成長 32.6%。為減低輸血反應、增進病人福祉並提高血液品質，歐、美、亞洲等地區先進國家均已陸續實施血品「儲存前減除白血球」措施，該類血品與醫院自行於病床邊製備「儲存後減白血品」相較，確有顯著降低輸血反應之優點。目前本會供應之儲存前減除白血球血品包括「減白紅血球濃厚液」及「減白分離術血小板」，為近年本會積極推廣之重點產品，也陸續獲得多所公私立醫療院所肯定及輸用。

本會暨各捐血中心於民國 90 年通過 ISO 9001 品質認證；會本部、台北及高雄捐血中心實驗室也陸續通過全國認證基金會（TAF）之醫學實驗室認證。此外，為提升輸血安全並有效縮短檢驗空窗期、降低輸血感染風險，本會自民國 99 年 7 月起階段性執行病毒核酸擴大檢驗（NAT）。經多年努力並在政府大力支持下，本會自 102 年 1 月 16 日起全面於血液常規檢驗中納入病毒核酸擴大檢驗，項目包括：B 型肝炎病毒（HBV）、C 型肝炎病



毒（HCV）及愛滋病毒（HIV-1）。102 年 1-12 月執行 NAT 檢驗計 1,702,783 人次，有效降低輸血感染之風險；同時，本會亦全面採用現代化自動檢驗設備，進行血液傳染病（病毒性及細菌性）等篩檢，為血液安全做最嚴格的把關。

個人資料保護法及其施行細則正式公告後，捐血人的個資保護本會極其重視。今（102）年初本會即成立「個資管理委員會」，並於各捐血中心設立「個資保護推動組」，積極推動個資保護措施。對於本會及各捐血中心委外處理之業務也進行定期稽核，以落實保障每位捐血人之隱私。

近年來，為因應少子化及部隊精減所造成年輕族群血源日益減少的問題，本會各捐血中心積極加強學校及部隊的捐血宣導活動。除定期舉辦「宣導講座」及「有獎徵答」活動外；也擴大召募學生志工並推廣學校捐血活動，期能有效提升並鼓勵年輕人踴躍參與捐血。

未來，本會將秉持誠信、和諧、效能、創新的原則永續發展成為台灣安全醫療用血來源的領航者。台灣捐血事業在充分達成捐供血平衡目標後，將持續提昇血液及服務品質，為捐血人和用血人提供更優質的服務。

最後，要特別感謝所有熱心支持捐血事業的企業、社團及捐血朋友的愛心，捐血事業在社會各界的大力協助及指導下，才能建立目前的規模，贏得大家的肯定。「捐血快樂，用血安全」是本會永續經營理念，今後還請大家繼續給我們愛護支持與鼓勵。



董事長胡惠德頒贈特殊貢獻感謝狀給台南市政府

Message from the Chairman

Huey-Te Hu

The total national blood Collection in 2013 has reached 2,490,434 units (including whole blood and apheresis), with the issues of 4,569,739 units of various types of blood products; national blood donation rate reached 7.54%, which adequately supplies the blood for medical use nationwide. The World Health Organization (WHO). uses the number of 10 RBCs per 1,000 inhabitants per year as a minimum requirement for adequate health care, while in 2013 TBSF issued red blood cells at about 48.5 bags (converted to international standard units.) Therefore, TBSF not only has sufficient blood supply, but is also remarkably on par with the advanced countries.

In line with the "Domestic Blood for Domestic Usage" national health policy and to relieve domestic plasma derived products shortages, TBSF began collecting recovery plasma from whole blood since 2007, and toll fractionted by the Australian CSL Limited. The plasma was manafacturing into four products, the "Human Serum Albumin Injection", the "Human Immunoglobulin Intravenous Injection", the "Coagulation Factor VIII concentrate", and the "Coagulation Factor IX concentrate." In addition to an adequate transfusion supply for the domestic medical institutions, based on humanitarian aid and the proper use of valuable blood resources, TBSF donated 6,111 bottles of Coagulation Factor VIII concentrate and Coagulation Factor IX concentrate to the World Federation of Hemophilia in 2011, followed by a total of 5,820 bottles of Coagulation Factor VIII concentrate to the World Federation of Hemophilia in 2012 and 2013, and the donations had reached to many countries in need. The love from the blood donors not only blessed our people, but also extended worldwide.

In order to continue improving the blood quality and secure the safety of blood transfusion, our blood centers will continue to promote and prepare "apheresis platelet ." The supply of this year reached 224,985 bags, accounting for 89.9% of all platelet supply; where "leukocyte-reduced apheresis platelets" accounting for 27.1% of the apheresis platelet supply, with a growth of 32.6% compared to last year (2012). In order to reduce transfusion reactions, enhance patient well-being and improve the blood quality, advanced nations in Europe, America, Asia have been implementing the "pre-storage leukocyte-reduction" process on blood products. Such blood products are well recognized in reducing transfusion reactions compared to the "post-storage leukocyte-reduction blood products" that some hospitals prepared at bedside. Currently, the pre-storage leukocyte-reduction blood products that TBSF supply include "leukocyte-reduced RBC" and "leukocyte-reduced apheresis platelets", which have been our actively promoted key products in recent years, and have also been steadily getting recognitions and usages from multiple public and private medical institutions.

All of our Blood Centers acquired ISO 9001 certification; Our foundation headquarters, Taipei Blood Center, and Kaohsiung Blood Center also acquired the Medical Laboratory Accreditation from Taiwan Accreditation Foundation (TAF). Furthermore, to enhance the safety of blood transfusion and reduce the risk of transfusion-transmitted infections, we have implemented the Nucleic Acid Amplification Testing (NAT) in a manner that fully covered the blood collected since this year. From January to December of 2013, a total of 1,702,783 donations were tested with NAT. The yield of the NAT testing reached 0.05%, which effectively reduced the risk of transfusion-transmitted infection.



The Foundation finds great importance to protect the blood donors' personal information, especially after the official announcement of the Personal Data Protection Act and its enforcement rules. The Foundation has established " Personal Data Management Committee" early this year (2013), and a "Personal Data Protection Enforcement Team" was created at each blood center, to actively enforce personal data protection measures. Regular audits are carried out upon the outsourced businesses, to implement security of every blood donor's privacy.

In recent years, in response to the dwindling of the younger blood donors caused by low birth rate and the downsized military force, our blood centers have been actively strengthening blood donation advocacy activities at schools and the military. In addition to regularly organized " advocacy seminars" and "Q&A prize contests", student volunteer recruitments have been expanded to promote school blood donation events, in hopes to effectively enhance and encourage young people to take part in blood donation.

As we look forward, the Foundation will continue to uphold core principles of integrity, harmony, efficacy, and innovation in sustainable development, and become a navigator in Taiwan's secured medical blood products resources. After the Taiwan blood donation business fully reaches the target equilibrium, continuity to improve the blood quality and service quality will be provided, to cater to blood donors and blood recipients with finer services.

Last but not least, to give special thanks to all the enthusiastic businesses and organizations supporting the movement of blood donation with all their love and passion. Without great support and guidance from all of you, the blood donation business will not be as good as it is in today, and full of recognition throughout the entire community. "Donate blood happily, receive blood safely" is the core value of our sustainable development, so please continue to grant us your love, support, and encouragement .



捐血事業簡史

民國 63 年以前，台灣的醫療用血幾乎全係有償供應，不僅有違文明，損害國家體面更有傳染疾病之虞。於是一些熱心公益的機關、社團、學校、公司、工廠等，共同發起推動愛心人士捐獻熱血運動，提振關懷社會的公德心，救助需血使用的病患。中華民國捐血運動協會遂於 63 年 4 月 19 日，在當時紅十字會台灣省分會會長蔡培火先生倡導下成立，從此台灣逐步走入無償捐血時代。

捐血運動協會為有效執行捐供血作業，從 63 年 8 月起相繼成立台北、台中、高雄、台南等 4 個捐血中心，在各地積極展開捐供血工作。

為配合國家醫療政策、健全無償捐供血制度，中華民國捐血運動協會第 6 屆第 2 次會員代表大會決議捐助設置「財團法人中華民國捐血事業基金會」，奉行政院衛生署（現為衛生福利部）79 年 1 月 3 日衛署醫字第 850280 號函核定於民國 79 年 1 月 1 日成立。原捐血運動協會所屬台北、台中、台南、高雄等捐血中心於同日起改隸基金會。民國 80 年以後，又相繼成立花蓮、新竹捐血中心。

台灣血液機構擴大與世界先進國家聯繫，提高血液科技研究水準，是一種必然趨勢。為了便於運作，奉行政院衛生署核定於 81 年 7 月 1 日起，更名為「財團法人中華血液基金會」。中華血液基金會成立後，中華民國捐血運動協會繼續運作，並於 86 年 3 月第 8 屆第一次會員代表大會決議更名為「中華捐血運動協會」，目前擁有團體及個人會員千餘，和基金會的事業，相輔相成，對於支持捐血運動之推展，有正面而關鍵性影響。協會之運作，係在各捐血中心內成立聯絡中心，負責會員服務聯繫。所經辦的「熱血雜誌」，每個月出刊 1 次，為捐血文宣工作重要工具。

為因應國際交流及實際情況需要，「財團法人中華血液基金會」經第 4 屆第 7 次董事會議通過，更名為「財團法人台灣血液基金會」，奉行政院衛生署核復同意，於 93 年 10 月 18 日完成法人登記。本會於 97 年 4 月 21 日修正法人名稱為「醫療財團法人台灣血液基金會」。

本會係依據民法及醫療法之規定由中華捐血運動協會捐助設立之非營利性財團法人醫療機構，主管機關為行政院衛生署，供應全國百分之九十九以上之醫療用血。多年來，台灣血液事業在政府的領導、社會大眾的支持以及本會全體工作人員的努力下才有今日的規模。未來更應百尺竿頭，以捐血快樂、用血安全為經營理念，為醫療用血嚴格把關，為捐血者與用血者做最完善的服務。



A Brief History of Blood Donation Services in Taiwan

Prior to 1974, almost all blood for medical use in Taiwan was supplied by paid donation. This practice was considered uncivilized and was also negative to the national image. It was also unsafe and could transmit infections. Subsequently, a number of public-spirited organizations, societies, schools, business enterprises and factories joined together to start a movement to promote voluntary blood donation by appealing to the goodwill of the society and to help patients in need of blood. The Blood Donation Association of the Republic of China （BDA） was thus, under the initiation of Mr Pei-Huo Tsai, then President of the Red Cross Society of the Republic of China Taiwan Provincial Chapter, founded on April 19, 1974. Taiwan then entered the age of non-remunerated blood donation services.

To effectively promote blood donation, the BDA set up four blood centers in Taipei, Taichung, Kaoshiung and Tainan to actively promote blood donation since August 1974.

To coordinate with the national health policies and to strengthen the non-remunerated blood service system, the BDA, at its second meeting of representatives of the sixth session, resolved that the Blood Services Foundation of the Republic of China be established. Upon approval of the Department of Health of the Executive Yuan, the Foundation was officially inaugurated on January 1, 1990. The four blood centers in Taipei, Taichung, Kaohsiung and Tainan of the BDA were then placed under the Foundation. In 1991, two more blood centers in Hualien and Hsinchu were set up.

For Taiwan's blood services institutions to upgrade their levels in blood technologies and research, close international exchange and collaboration are essential. For the convenience of business operation, upon approval of the Department of Health of the Executive Yuan, the Foundation was renamed the Chinese Blood Services Foundation （CBSF） on July 1, 1992. The Blood Donation Association of the Republic of China continued to function alongside of the Foundation. In March 1997, at its first meeting of representatives of the 8th session, the Association was renamed the Chinese Blood Donation Association. The Association currently has a membership of some 1,000 institutions and individuals. It supports and supplements the activities of the Foundation by coordinating its members through liaison centers set up in the blood centers. Its monthly publication, "the Warm Blood", is widely circulated and serves as an important tool for the promotion of blood donation.

For more effective international exchange and to face realistic situations, at the 7th meeting of the 4th Board of Directors, a resolution was reached to change the name of the Chinese Blood Services Foundation to the Taiwan Blood Services Foundation （TBSF）. Upon approval of the Department of Health of the Executive Yuan, the Foundation was registered as a corporate body on October 18, 2004. On April 21, 2008, the name of the Corporate was amended to Medical Corporate Taiwan Blood Services Foundation.

In accordance with regulations of the Civil Law and the Medical Care Act, the non-profit corporate medical institutions TBSF was set up by the Chinese Blood Donation Association to supply more than 99% of blood for medical use in the country. The competent authority is the Department of Health of the Executive Yuan. That the blood services of Taiwan have reached the stage of what they are now owe primarily to the leadership of the government, support of the society, and the hard work of the staff of the Foundation. We shall continue to promote further the goals of happy blood donation and safe blood use to supply blood for medical use and to provide blood donors and recipients with the best possible services.

目的與任務

本會以建立無償捐供血制度，辦理捐、供血業務，提高醫療用血品質，保障病患權益，增進國民健康為目的。任務包括：

1 捐血事業之策劃與執行事項。
2 捐血制度之建立及用血安全之研究發展事項。
3 血液科技之研究事項。
4 各地公私立醫院病患用血之採集、檢驗、與供應事項。
5 捐血人健康維護研究事項。
6 不適輸用血液之利用及安全處理事項。
7 重大災變或戰時大量用血之籌劃供應事項。
8 國產血漿製劑之委託製造、儲存及供應事項。
9 其他有關捐供血事項。

Goals and Functions

The Foundation is to establish a non-remunerated blood donation and supply system, to conduct donation and supply of blood, to improve the quality of blood for medical use, to protect the rights of patients, and to enhance the health of the citizens. Specifically, the functions of the Foundation are:

1. To plan and implement blood donation services;
2. To establish blood donation systems, and to conduct research and development on safe blood use;
3. To conduct research on blood science and technology;
4. To collect, laboratory-test, and supply blood for patients of public and private hospitals;
5. To conduct research on the health maintenance of blood donors;
6. To conduct matters concerning the use and safety management of blood unsuitable for transfusion;
7. To plan and supply blood in large quantity at times of major disasters or wars;
8. To commission toll fractionation, to storage and supply domestic plasma derived products;
9. Other matters concerning blood donation and supply.



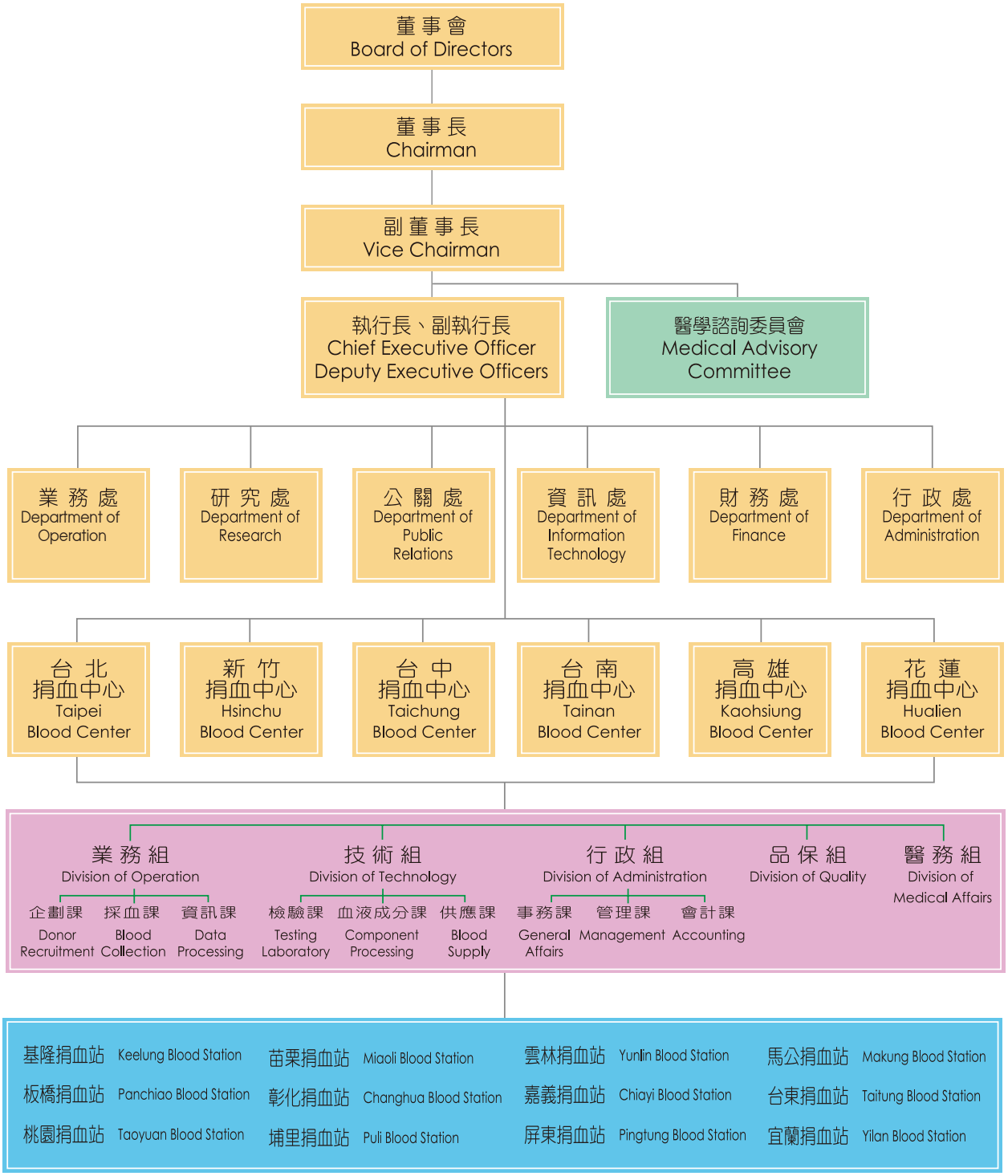
組織架構

本會設董事會為最高權力機構，由董事 13 人所組成，均為無給職，任期 4 年，其中 4 人由中央衛生主管機關推薦之人選充任之。中央衛生主管機關推薦董事人選，須就醫政、藥政、防疫及血液科技等專業領域推薦適當之代表；本職異動時，應更改推薦人選繼任，至屆滿原任期為止。其餘董事首屆由捐助人遴聘之，後屆董事由前屆董事會選聘，連選得連任。董事互選董事長、副董事長各 1 人綜理會務，並置執行長 1 人、副執行長 2 人，另設有醫學諮詢委員會協助醫療技術有關問題。執行長之下設業務、研究、公關、資訊、財務、行政六處，並在全國適當地點設置台北、新竹、台中、台南、高雄、花蓮 6 個捐血中心及 12 個捐血站。

Organization

The Board of Directors is the highest authority of the Foundation. The Board has 13 non-salaried members, each for a term of four years. Four of the Board members are recommended by the central competent health authority from appropriate representatives in the professional fields of medical affairs, pharmaceutical affairs, disease control, and blood science and technology. When there is a shift of position of a member, a new member shall be recommended to serve the rest of the term. The rest members of the first Board are appointed by contributors; members of the subsequent Boards are appointed by the previous Board of Directors. They may be re-elected. Members elect among themselves one each Chairman and Vice Chairman to manage the Foundation. A Chief Executive Officer and two Deputy Executive Officers operate the Secretariat, which has six divisions of Business Operation, Research, Public Relations, Information Technology, Finance, and Administration. A Medical Advisory Committee advises on matters concerning medical care. Six blood centers are set up in Taipei, Hsinchu, Taichung, Tainan, Kaohsiung and Hualien. In addition, there are 12 blood stations throughout the country.

組織體系
Organization





第六屆董事會

The 6th Term of Board of Directors

（民國 99 年 1 月至 102 年 12 月 /Jan.2010-Dec.2013）

董事長／ Chairman

胡惠德 Hu, Huey-Te（102 年 3 月 8 日接任）

副董事長／ Vice Chairman

葉金川 Yeh, Ching-Chuan（102 年 3 月 8 日接任）

董事／ Directors

吳伯雄 Wu, Po-Hsiung
羅光瑞 Lo, Kwang-Juei
郝維善 Hao, Wei-Shann
楊漢湶 Yang, Han-Chuan
張峰義 Chang, Feng-Yee
侯勝茂 Hou, Sheng-Mou
王鏡山 Wang, Ching-Shan
戴東原 Tai, Tung-Yuan
劉麗玲 Liu, Li-Ling
王宗曦 Wang, Tsung-Hsi
林四海 Lin, Szu-Hai（101 年 10 月 30 日接任）

監察人／ Supervisor

李悌元 Li, Ti-Yuan

執行長／ Chief Executive Officer

魏昇堂 Wei, Sheng-Tang（101 年 7 月 1 日接任）

副執行長／ Deputy Executive Officer

楊炳忻 Yang, Ping-Cin

各捐血中心主任

台北捐血中心／ Director of Taipei Blood Center
洪正昇 Hung, Cheng-Shen

新竹捐血中心／ Director of Hsinchu Blood Center
楊炳忻 Yang, Ping-Cin

台中捐血中心／ Director of Taichung Blood Center
林啓靈 Lin, Chi-Ling

台南捐血中心／ Director of Tainan Blood Center
蔡光昭 Tsai, Kuang-Chao

高雄捐血中心／ Director of Kaohsiung Blood Center
洪啓民 Hung, Chi-Ming

花蓮捐血中心／ Director of Hualien Blood Center
王雲龍 Wang, Yun-Lung

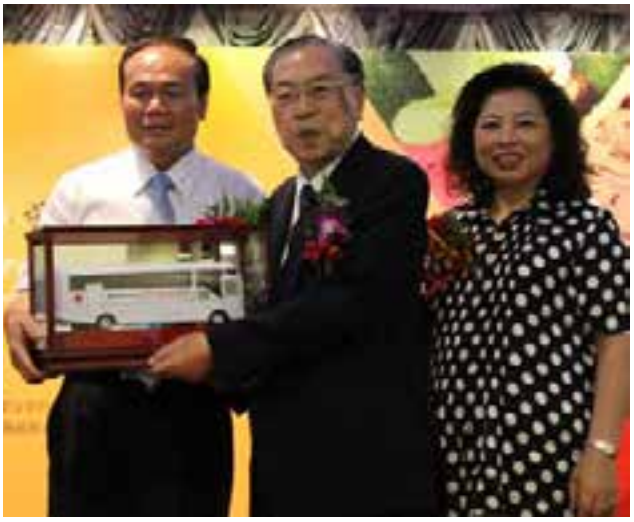


業務報告

Program Activities

- 業 務 Business Operation
- 公 關 Public Relations
- 財 務 Finance
- 研 究 Research
- 資 訊 Information Technology
- 行 政 Administration





業務處

Business Operation

採血、供血業務現況及未來發展

醫療用血

本會102年捐血目標：全血捐血（250cc/單位）2,267,000單位，分離術捐血210,200單位，500ml捐血率達37%。實際達成全血捐血2,262,452單位，分離術捐血227,982單位，500ml捐血率達41.37%。

因102年較101年醫院實際需求之血品有減少趨勢（其中紅血球類下降2.9%，血小板類下降1.7%，血漿類下降7.7%），102年本會捐血量較101年呈現負成長約2.5%，捐血人口比率亦略下降為7.54%，仍超越許多先進國家水準。

為提升血液品質及輸血安全，今年持續推廣製備「分離術血小板」，年度供應計達224,985單位，佔全部血小板供應量89.9%；其中減除白血球之分離術血小板佔分離術血小板供應量27.1%，較101年成長32.6%。為減低輸血反應、增進病人福祉及提高血液品質，歐、美、亞洲等地區先進國家（包括：奧地利、加拿大、德國、愛爾蘭、日本、荷蘭、西班牙、英國）均已陸續實施血品「儲存前減除白血球」措施，該類血品與醫院自行於病床邊製備儲存後減白血品方式相較，確有顯著降低輸血反應之優點。本會目前儲存前減除白血球血品供應包括「減白紅血球濃厚液」及「減白分離術血小板」，已成為近年本會積極推廣之重點，也陸續獲得多所公私立醫療院所肯定及輸用。

值得一提的是，根據世界衛生組織（WHO）訂定各國在輸用紅血球是否達到足夠之最低標準為：每千人口至少要能提供10袋紅血球；而本會在102年實際提供醫院之紅血球為：每千人口約48.5袋（經換算國際標準單位），此數值約等同美國2011年之統計數值。因此，國內在捐供血方面不僅達到供應無虞，亦可與先進國家並駕齊驅。

國人血液製劑---「國血製劑益康」

血液製劑包括如白蛋白、免疫球蛋白、第八凝血因子、第九凝血因子等，為許多醫院一般病患或特殊如血友病患等所需，但國內歷來幾乎完全仰賴外國進口，國血製劑的誕生，溯自95年底因應國際間血液製劑缺貨，且人體免疫球蛋白因健保核價較低，原進口商紛紛退出台灣市場，當時衛生署邀集本會及醫藥各界代表商議解決之道，乃制訂國血國用政策，以照顧國內病患權益，由本會自96年收集原料血漿，直接送至血漿分離工廠製成國血製劑，並於97年開始供應國人所需，自此打破長年進口藥品獨占之局面，國血製劑對健保之貢獻不言而喻。

102年本會為配合政府「國血國用」衛生政策，共收集40,788.9公斤血漿原料，分4批運至澳洲CSL血漿分離工廠，加工製成四種



「國血製劑益康」血液製劑：包括 20% 人血清白蛋白注射劑、人類免疫球蛋白靜脈注射劑、250IU 第八凝血因子注射劑及 500IU 第九凝血因子注射劑，持續供應國內醫療院所使用及為國人健康挹注心力。

另外，本會基於人道救濟立場，及妥善運用寶貴的醫療資源，於 102 年 11 月再次捐贈第八凝血因子 2,000 瓶，捐贈世界血友病聯盟（World Federation of Hemophilia），並經轉贈多國，捐血人的愛心不僅嘉惠國人，也廣及世界。

加強血液安全，防範輸血感染

為加強捐血前篩檢，杜絕 HIV 輸血後感染案例發生，本會 102 年持續推動「減少 HIV 捐入專案」，各捐血中心於各捐血場所，利用宣傳短片及海報宣導，以提醒高危險群切勿捐血，各捐血中心、捐血室、車均設置「私密性面談空間」，讓捐血人在私密環境下，能誠實回答問卷及相關問題。此外，也聘請專業講師講授，辦理提昇血液安全在職教育訓練，以增進採血人員高危險群面談篩檢技巧。另持續更新「良心回電」單張及製作海報，提供衛生署委託愛滋病匿名篩檢醫院資訊，呼籲捐血人勿利用捐血途徑進行愛滋病篩檢，經統計 102 年所有捐血者中愛滋病毒（HIV）陽性率達十萬分之 3.46，為過去 5 年來新低，顯見減少高危險捐血者捐入相關措施獲得成效。

為提升血液品質及降低輸血感染風險，在政府大力支持下，本會自 102 年 1 月 16 日起於常規檢驗中納入實施增加檢測 NAT 項目（核酸擴大檢驗，包括 HIV-1、HBV、HCV 等三項），並自 102 年 2 月 1 日起全面供應經該項檢驗之血品，預期將有效防範輸血感染之案例發生，102 年 1-12 月執行 NAT 檢驗計 1,702,783 人次，EIA 陰性 /NAT 陽性案例計 882 例已有實際成效。

為加強面談人員之能力及技巧，經常性辦理實務訓練，102 年持續邀請專家辦理各捐血中心「採血面談作業教育訓練」課程，及進行神秘客稽核調查，以落實面談作業功能，減少高危險族群捐入。

為持續改善捐血人手臂消毒方式，102 年另經評估通過使用 chlorohexidine 消毒液，將可於對優碘過敏之捐血人之手臂消毒上使用，並預期可降低血小板血品汙染率。



北京大學碩博士師生參訪新竹捐血中心

Current Status of Blood Donation and supply
Blood for Medical use：

Our 2013 blood donation goal: whole blood donation of 2,267,000 units (250cc/unit), apheresis blood donation of 210,200 units, and 500ml blood donation rate of 37%. The actual numbers were, whole blood donation of 2,262,452 units, apheresis blood donation of 227,982 units, and 500ml blood donation rate of 41.37% .

Due to the decreasing trend of the actual needs of blood products by the hospitals in 2013 compared to 2012 (in which red blood cells products dropped by 2.9%, platelet products dropped by 1.7%, plasma products dropped by 7.7 %), we had a negative growth of about 2.5 % from 2012 to 2013. The blood donation per population ratio also dropped slightly to 7.54%, yet still above the rates of many advanced nations.

To enhance the blood quality and blood transfusion safety, we continue to promote the preparation of "apheresis platelet" this year, with a total annual supply of 224,985 bags, which accounted for 89.9% of all platelet supply; leukocyte-reduced apheresis platelets accounted for 27.1% of the apheresis platelets, with a growth of 32.6% compared to 2012. In order to reduce transfusion reactions, enhance patient well-being and improve the blood quality, advanced nations in Europe, America, Asia, and other areas (including: Austria, Canada, Germany, Ireland, Japan, Netherlands, Spain, United Kingdom) have all been implementing "pre-storage leukocyte-reduction blood products" process on blood products. Such blood products are well recognized in reducing transfusion reactions compared to the post-storage leukocyte-reduction blood products method hospitals are using at bedside. Currently, the pre-storage leukocyte-reduction blood products that TBSF supply include "leukocyte-reduced RBC" and "leukocyte-reduced apheresis platelets", which have been our actively promoting key products in recent years, and have also been steadily getting recognitions and usages from multiple public and private medical institutions.

It is worth mentioning that, according to the World Health Organization (WHO), uses the rumber of 10 RBCs per 1,000 inhabitants per year as a minimum requirement for adequate health care, while the actual red blood cells provided to hospitals by our foundation in 2013 was: about 48.5 bags (converted to international standard units)per thousand population, which is about the same as the United States' figure in 2011. With that, our foundation not only has a sufficient blood supply, but is also remarkably on par with the advanced countries .

"Ikang-Plasma Derived Products from National Blood" ：

Plasma derived products such as Human Albumin, Immunoglobulin, Coagulation Factor VIII concentrate, and Coagulation Factor IX concentrate are essential to many patients in hospitals such as hemophilia patients. Yet, for many years, Taiwan had almost entirely relied on imports. The birth of the National Blood Plasma derived products traced back to the end of 2006 during the international shortage, and the importers of human immunoglobulin were retracting out of the Taiwan market due to low reimbursement price from the National Health Insurance Administration, the Department of Health then set forth “the domestic blood for domestic use policy” after meeting with representatives from medical and pharmaceutical fields, to protect the rights of domestic patients, and to have our foundation collect source plasma since 2007, ship directly to the plasma fractionation factory to produce plasma derived products, and began to meet domestic demand in 2008, breaking the age-long monopoly of foreign-imported drugs, the Domestic- plasma products’ contribution to the National Health Insurance is enormous.



To coordinate with the government's "Domestic Blood for Domestic Use" Health Policy, we have collected 40,788.9 kg of recovery plasma in 2013, and shipped them to the Australian CSL Ltd. plasma fractionation factory in four batches to be processed into four kinds of "Domestic Blood Preparation Ikang" blood plasma derived products, include: 20% Human Albumin solutions, Human Immunoglobulin for intravenous use, 250 IU Coagulation Factor VIII concentrate, and 500 IU Coagulation Factor IX concentrate. TBSF continues to supply the blood product to domestic medical institutions in efforts to assist in the health care of our people.

In addition, for humanitarian aid and the proper usage of valuable medical resources, TBSF donated 2,000 bottles of Coagulation Factor VIII concentrate to the World Federation of Hemophilia in November 2013 to be transfered to nations in need. The love from the blood donors not only blessed our people, but also extended worldwide.

Strengthening blood safety to prevent transfusion-related infections

To strengthen the donor screening interview before blood donations to stop the occurrence of HIV infection through blood transfusion, TBSF continued to promote the "Minimizing HIV Blood Donation Project" in 2013. Educational videos and posters are used to remind people of high-risk groups to refrain from donating blood at all blood centers and blood donation locations. A "private interview space" was set up in each blood centers, blood stations and blood vehicles to allow donors to respond honestly in a private environment to the relevant interview questions. Experts have also been invited to conduct on-job training on the improvement of blood safety, and to improve the skills of staffs in screening and interviewing the high-risk groups. Furthermore, the "Conscientious Call-back" leaflet and poster have been constantly renewed, providing names and addresses of hospitals commissioned by the Ministry of Health and Welfare for anonymous screening of AIDS. Blood donors are urged not to use blood donation as a means for AIDS screening. Of all donors in 2013, the rate of HIV positive donation was 3.46 per hundred thousand donations, which reached the lowest in the last 5 years. It is apparent that our screening efforts proved to be effective.

To improve the blood quality and reduce the risk of blood transfusion-related infection, with a strong support from the government, NAT (Nucleic Acid Amplification Testing, including HIV, HBV, and HCV) was included and implemented in the routine tests since January 16th, 2013, and such tested blood products were to be supplied starting February 1st, 2013. It was expected to effectively prevent post-transfusion infections. Of the 1,702,783 people tested under the new NAT criteria from January to December 2013, EIA negative/NAT positive cases totaled 882, showing effective results.

To strengthen the ability and skills of the interviewing personnel, practical trainings were conducted regularly, experts were invited again to conduct interview procedure training programs, and Customer satisfaction survey was conducted by auditing and investigated by mysterious customers, to ensure the interviewing procedures were correctly carried out, to reduce high-risk group donations.

To continue improving arm disinfection methods on blood donors, we have assessed and started using chlorohexidine disinfectant in 2013, which will be used on blood donors who are allergic to iodine disinfectant, and is expected to reduce of platelet blood product contaminations.



研究處

Research

品質保證

台灣血液基金會會本部及各捐血中心均通過 ISO 9001 品質認證；同時，會本部、台北捐血中心、高雄捐血中心實驗室亦通過全國認證基金會（TAF）之醫學實驗室認證。各項作業程序包括：捐血者篩選、血液採集、血液檢驗、成分製造、儲存管理、血液運送等工作均依循標準作業手冊（SOPs），並接受國內衛生主管機關（包括食品藥物管理署）、台灣檢驗科技股份有限公司（SGS Taiwan Limited）等機構之查核。除此，為將國人血漿運往澳洲 CSL 血漿工廠（世界主要血漿製劑工廠之一）製造血漿製品，提供國內醫療使用，我們定期接受 CSL 血漿工廠派員查核，相關作業以及血液品質均經澳洲政府醫藥品管理局（Therapeutic Goods Administration, TGA）審核，核准台灣血漿運往澳洲製造血漿製品。

血液安全

為確保輸血安全，醫療用血已全面加測 HBV、HCV 及 HIV-1 病毒核酸試驗；使用英國國家標準血清（British working standards）保證每一批次檢驗的敏感度；全面採行自動檢驗設備，包括：PK7300, AU2700, Freedom Evolyzer, TIGRIS, Bact/ALERT 3D 等儀器，進行血液傳染病（病毒性及細菌性）篩檢、血型試驗、抗體篩檢，試驗步驟的進行、試驗結果的判定以及傳送等均經由儀器及電腦設備執行，避免人為疏失，為血液安全做最嚴格的把關。同時，各捐血中心持續參加國內外之能力試驗（proficiency），包括：美國病理學會（CAP）、澳洲國家血清實驗室（NRL）、美國組織相容免疫基因協會（ASHI）、台灣醫檢學會等機構辦理之能力試驗，檢驗結果的正確性獲得肯定與認可。除此之外，本會設有醫學諮詢委員會，經由國內醫學中心輸血醫學方面以及血液傳染病方面的專家學者組成，對於血液安全有關事項訂定政策，以為遵行。

輸血服務

隨著醫療進步，長期接受輸血治療病人的數目愈趨增加，臨床上提供配合血液的需求亦愈趨增加，這些血液往往是相當稀少的，本年度我們持續進行捐血者 HLA 及紅血球抗原的檢驗工作，將稀有紅血球予以冷凍長期保存，並持續累積 HLA 以及稀有血液捐血者的建檔數量，以充分提供臨床輸血需要。

除此，為協助國內醫療機構處理臨床輸血有關問題，我們持續提供輸血諮詢檢驗服務，包括各種紅血球抗原及抗體的篩檢鑑定等檢驗服務，提供臨床輸血前檢查及輸血後不良反應調查等服務。輸血前抗體篩檢，病人如含造成溶血反應的抗體，則須給予相合血液；除了臨床常見造成溶血反應的抗體，台灣地區抗體篩檢尚須包含 Anti-Mia，白種人則幾乎不含此抗原

（亦不含此抗體），因此歐美進口試劑無法測出此抗體；為確保國人輸血安全，我們提供包含完整抗原的紅血球，製成抗體篩檢試劑，提供國內醫療機構使用，為臨床醫療輸血提供最完整的服務。

研究發展

除了例行捐供血作業之外，我們仍持續進行研究工作，以持續改善血液品質並提升血液安全為目的。為落實受試者保護並強化研究計畫之倫理審查，各研究計畫均須經本會「倫理審查委員會」之審查，本會倫理審查委員會亦已通過衛生福利部之查核，為合格之倫理審查委員會。除了作為改善作業以及提升血液安全的參考，我們的研究成果多能經由國際輸血醫學專家的認可，發表於國際輸血醫學學會及期刊，分享國際輸血領域同伴。本年度台灣捐血中心有多篇研究工作成果獲選，於美國血庫學會（AABB）以及國際輸血學會（ISBT）年會刊載報告。除此之外，今年度有二篇研究報告獲得國際輸血醫學專家的肯定，獲選刊載於國際醫學期刊，研究主題分別為血小板抗原的研究以及病毒核酸試驗的研究。



本會參與「2013 年健康照護聯合學術研討會」

Quality Assurance

TBSF head office and its blood centers are accredited by ISO 9001. In addition, the laboratories of TBSF head office, Taipei Blood Center, and Kaohsiung Blood Center are accredited by the Taiwan Accreditation Foundation (TAF) in the field of medical laboratory. Procedures for donor selection, blood collection, testing, processing, and storage are performed in accordance with procedure manuals. Audit activities including those performed by FDA Taiwan, SGS Taiwan Limited, and CSL Australia, are carried out on a regular basis to ensure the quality of blood and blood components. Moreover, CSL Limited Australia (one of the key plasma fractionator in the world) regularly inspects our centers so as to get approval from TGA Australia (Therapeutic Goods Administration) for manufacturing of Taiwanese plasma.

Blood Safety

Two out of TBSF's six blood centers perform blood testing activities. In addition to enzyme immunoassay, nucleic acid testing (NAT) are performed for the detection of HBV, HCV, and HIV-1 on each donation. British working standards are used to monitor and ensure the sensitivity of each test run for viral screening. To minimize manual error, fully automatic instruments such as PK7300, AU2700, Freedom Evolyzer, TIGRIS and Bact/ALERT 3D are used for the detection and interpretation of test results, which are subsequently transmitted to each blood center for the labeling of blood and blood components. To ensure the accuracy of laboratory testing, we take part in the proficiency programs provided by CAP USA, ASHI USA, NRL Australia, and Taiwan Society of Laboratory Medicine on a regular basis. Our testing sesults are therefore considered accurated and reliable through the consistency with those from the majority of the laboratories participated in the programs. Also, we have a medical consultation committee comprised of domestic experts and scholars in transfusion medicine to set forth policies in blood safety.

Transfusion Services

As medical science advances, the increase in the number of patients required having long-term transfusion leads to the increase in the demand of compatible bloods, some of these bloods could be relatively rare. As a result, selective donors were subjected to the program for the detection of HLA antigens and red-cell antigens this year as we have normally done. To assist hospital transfusion services in testing of recipient specimens on pre and post blood transfusion, we continue in the provision of diagnostic services which include the detection of red-cell antigens, antibodies as well as HLA antigens. In addition, we continue to play a role in pre-transfusion testing of recipients through the provision of reagent red cells to domestic transfusion services. As required in Southeast Asia to cover the clinically significant antibody, Anti-Mur, for the detection of antibodies for transfusion safety, we, on a regular basis provide donor red cells that contain the required antigens including Mur for domestic demand. Overall, we, as the sole provider of blood and blood components in Taiwan have delivered functional services which are critical to transfusion safety for clinical transfusion practices.

Research Activities

In addition to routine blood center activities, we have actively played parts in research programs with the aim of improving the quality and safety of blood and blood components. The study programs carried out were submitted to TBSF's Institutional Reviewing Board (IRB, certified by the Ministry of Health and Welfare) as to protect study subjects and to carry out ethical review of the studies as well. During this year, a number of our studies were published at AABB and ISBT annual meetings. Of these,

two studies on the subject of platelet antigens and nucleic acid testing were published in international peer-reviewed medical journals.



第 20 屆「PICS 血液、組織及細胞專家圈會議」與會官員參訪台北捐血中心



公關處

Public Relations

捐血有愛 捨（蛇）我其誰

為紓解春節過年期間血液短缺並充裕醫療用血，自 85 年起每年於春節前一個月訂為「捐血月」，各捐血中心並於捐血月期間舉辦各項捐血活動，同時也恭請　總統頒發「呼籲捐血公開信」，籲請國人踴躍捐血。102 年適逢蛇年，因此捐血月主題訂為「捐血有愛 捨（蛇）我其誰」。記者會於 1 月 4 日召開，並邀請熱心的視障捐血人喻家貞小姐以及全家共有 5 位 Rh 陰性血型家族陳瑩珊小姐和母親分享捐血助人的故事。另外也邀請因生產大出血，經輸血 3,000 西西後，才從鬼門關救回的藝人彭佳慧小姐，以及另一位從出生三個月起即因海洋性貧血需要定期輸血，且已持續 30 多年的張育禎小姐，一起向所有的捐血人表達感謝之意，場面溫馨感人。

捐血－拯救生命的禮物

102 年「世界捐血人日」的主題為「Every Blood Donation is a Gift of Life」（捐血－拯救生命的禮物）。本會特別針對世界衛生組織（WHO）公佈之全球性捐、供血相關統計資料與台灣捐供血成果做對比；對比之下台灣歷年來在自願無償捐血推動及血液安全方面努力的成果獲得肯定並超越其他先進國家。

記者會上也以『血袋生命樹』代表「拯救生命的禮物」，並邀請全國女性捐血單位最高者 - 王秋瓊女士與二位熱血青年賴玟翔及陳勇嘉及家人共同參與記者會，分享捐血故事與心得。王秋瓊女士的捐血故事除國內新聞媒體及大陸新華網均大幅報導外；中央社外文新聞中心也以英文對外發佈此項報導。



視障捐血人劉重進 - 固定每三個月前往捐血



企業社團　共襄義舉

長久以來，社團及企業均大力支持捐血事業並積極舉辦各項捐血活動。今年全國性社團、部隊及醫療機構共捐得血液 730,981 單位（每單位 250 西西），佔總捐血量的 29.35%。詳如下表：

單位	台北 捐血中心	新竹 捐血中心	台中 捐血中心	台南 捐血中心	高雄 捐血中心	花蓮 捐血中心	總計
國際獅子會	142,793	78,763	134,267	27,554	13,468	12,507	409,352
國際同濟會	28,584	12,871	53,689	7,175	2,788	2,876	107,983
國軍部隊	9,629	9,610	10,102	24,772	17,585	6,183	77,881
國際佛光會中華總會	17,667	9,007	15,199	8,382	12,289	2,939	65,483
國際扶輪社	10,204	2,904	6,711	12,896	22,316	3,655	58,686
醫療院所	1,710	302	3,298	3,902	984	1,400	11,596
合計	210,587	113,457	223,266	84,681	69,430	29,560	730,981

此外，各企業機構也定期舉辦全國性大型捐血活動，嘉惠用血病患。102 年全國性捐血活動如下：（按活動日期排列）

1. 台灣高鐵公司：1 月 4 日～ 18 日於台北南港總公司及台中、高雄二地站區舉辦捐血活動共 3 場，捐得血液 542 單位。
2. 富邦慈善基金會：1 月 8 日～ 25 日舉辦「富邦有愛、10 在好正」活動共 27 場，捐得血液 4,124 單位。
3. 西堤牛排：1 月 24 日～ 26 日及 6 月 14 日～ 30 日舉辦「百萬熱血青年召集令」活動共捐得血液 63,503 單位。
4. 群益金融集團：1 月 27 日～ 3 月 22 日舉辦「群起獻愛心、傳遞幸福公益」活動共 8 場，捐得血液 924 單位。
5. 新光集團：2 月 20 日～ 24 日舉辦「我捐血、讓愛凝聚」活動共 8 場，捐得血液 1,317 單位。
6. 中華郵政公司：2 月 21 日～ 3 月 20 日舉辦「寒冬送暖熱血情、郵政壽險捐血月」活動共 240 場，捐得血液 29,288 單位。
7. 南山人壽慈善基金會：5 月 16 日～ 8 月 30 日舉辦「2013 南山人壽捐血活動」共 97 場，捐得血液 13,786 單位。
8. 內政部役政署：6 月 1 日～ 9 月 30 日為鼓勵全國替代役男踴躍捐血，舉辦「有情有役，暑期百萬 CC」捐血活動，捐得血液 8,964 單位。
9. 國泰慈善基金會：6 月 26 日～ 9 月 7 日舉辦「2013 夏日捐血活動」共 73 場，捐得血液 14,909 單位。
10. 台灣人壽保險股份有限公司：7 月 5 日～ 9 月 21 日舉辦「台灣人壽 2013 熱血大募集」活動共 10 場，捐得血液 725 單位。
11. 國寶人壽：7 月 19 日～ 26 日於台北、台中、高雄三地舉辦「國寶人壽 20 周年慶捐血活動」共 3 場，捐得血液 385 單位。
12. 和泰汽車股份有限公司：8 月 2 日～ 27 日舉辦「2013 和泰汽車全國捐血月」活動共 61 場，捐得血液 4,381 單位。
13. 龍巖慈善基金會：8 月 2 日～ 10 月 22 日舉辦「熱血沸騰 傳遞愛與希望」捐血活動共 7 場，捐得血液 676 單位。
14. 逢甲大學校友會：11 月 2 日～ 16 日舉辦「2013 年全國校友會同步捐血」活動共 22 場，捐得血液 3,216 單位。



「志明」、「淑芬」熱血第一名

奉獻心力　回饋社會

歷年來，社團、企業與民間團體出錢又出力，除了辦理各項捐血活動外，更熱心捐贈各項物資。今年各捐血中心共募得大型捐血車 5 輛、血液運送車 3 輛、行政宣傳車 2 輛、空血袋共 159,835 個。詳如下表：

項目 / 中心別	空血袋（個）	大型捐血車（輛）	血液運送車（輛）	行政宣傳車（輛）
台北捐血中心	76,620	0	0	0
新竹捐血中心	0	2	1	0
台中捐血中心	67,575	3	0	1
台南捐血中心	1,684	0	1	0
高雄捐血中心	5,856	0	1	0
花蓮捐血中心	8,100	0	0	1
總計	159,835	5	3	2

績優表揚　倍感榮耀

各捐血中心的捐血績優表揚大會分別於 4 ～ 5 月間於轄區內舉辦。今年接受表揚的學校計有 113 所，獲頒教育部獎狀；社團機構共有 336 個單位，獲頒內政部獎狀；國軍部隊共有 35 個單位，獲頒國防部獎狀；另有 142 個單位或個人榮獲本會特殊貢獻感謝狀。

個人捐血績優表揚：捐全血 100 ～ 420 次有 5,621 人；分離術捐血 100 ～ 1,600 次有 5,244 人，其中捐血達 1,000 次以上者 153 位。此外，分離術捐血達 500 次（含）以上；男性捐全血達 150 次（含）以上、女性捐全血 100 次（含）以上者共 464 位（全血 212 位；分離術捐血 252 位），除獲頒行政院衛生署獎狀外，並由中華捐血運動協會理事長分別致贈榮譽紀念章乙枚。

各捐血中心表揚大會時間、地點如下：

- 台北捐血中心 4 月 26 日／「新北市政府行政大樓 - 多功能集會堂」
- 新竹捐血中心 5 月 10 日／新竹市「國賓大飯店 - 國際會議廳」
- 台中捐血中心 4 月 25 日／台中市「潮港城國際美食館」
- 台南捐血中心 4 月 18 日／台南市「生活美學館 - 演藝廳」
- 高雄捐血中心 4 月 27 日／「國立高雄海洋科技大學 - 國際會議廳」
- 花蓮捐血中心 5 月 17 日／台東市「一家餐廳」

101 年度績優捐血人代表晉見總統活動於 12 月 18 日在總統府舉行。本次晉見代表中雲林斗六派出所員警郭潤坤先生（43 歲）在高三剛滿 18 歲時即開始捐血，目前已捐了 800 多次。他覺得挽救一條寶貴生命，比捉到小偷還要讓人高興；為了定期捐血小板，他自我健康管理非常嚴謹，他表示，捐血是維護健康最大密訣。

今年榮獲晉見總統的績優捐血代表有：曾貴錠、林琮霖、丁瓊原、施淇山、陳良銓、黃素珠、金飛龍、林登貴、顏鏗哲、蔡莉芸、徐盛堂、鍾樹明、陳招皇、黃堅忍、古煥枝、林明暖、鐘立志、李榮欽、王志華、張桐榮、楊文進、何志斌、林秀連、郭潤坤、徐崇豪、甘榮炯、鄭國斌、許豐盛、戴黃麗華、黃俊銘、涂建成、繆開慶、林恭勝、葉碧珍、王建華、陳敏沼、方漢璋、古雲川等共 38 位；並由本會董事長胡惠德及執行長魏昇堂陪同晉見。



滿意度調查 重視捐血人需求

102 年「捐血服務需求及滿意度調查」於 11 月 11 日至 12 月 4 日全面展開，調查對象為各捐血中心全血捐血百次以上，近兩年內未再回捐的合格捐血人。本次調查以郵寄問卷方式，共寄發問卷1,078份；回收有效問卷262份，回收率達24.3%。

經統計分析後，主要的結論為：（1）二年內未再捐血的原因，在個人因素方面以「罹患癌症或其他傷病需開刀或服用藥物導致無法捐血」最高；在捐血服務方面以「找不到方便捐血的地方」最高（2）滿意度最高的為「捐血場所整潔舒適」，佔 93%；而滿意度最低的則為「捐血登記表健康問診項目」佔 70.9%（3）捐血人認為最重要的是「採血人員具備良好的扎針技術」。

值的一提的是，本次調查有 99.1%的捐血人「同意」只要身體狀況良好，願意再定期捐血。另外，有 76.3%的捐血人「不同意」捐血紀念品會影響捐血意願；僅有 23.7%的捐血人「同意」捐血紀念品會影響捐血意願。

國際交流　吸取新知

近年來本會積極參與各項國際會議，吸取相關新知。今年參加之國際會議如下：

1. 第 23 屆國際輸血學會（ISBT）歐洲區域會議於6月2日至5日在荷蘭阿姆斯特丹舉行。本次會議由副董事長葉金川率團，團員有執行長魏昇堂、台北捐血中心主任洪正昇、台中捐血中心主任林啟靈、技術組長王萱慧、研究處技正白舜仲及新竹捐血中心業務組長王瓊玉等。
2. 2013 年美國血庫協會（AABB）國際年會於 10 月 12 日至 15 日在美國科羅拉多州的丹佛市舉行。本次會議由台南捐血中心主任蔡光昭率團，團員有台北捐血中心技正楊孟樺、新竹捐血中心負責醫師孟繁蕃、高雄捐血中心負責醫師曾士賓及技士林曉琳等。
3. 第 24 屆國際輸血學會（ISBT）亞洲區域會議於 12 月 1 日至 4 日在馬來西亞的吉隆坡舉行，本次會議由執行長魏昇堂率團，團員有副執行長楊炳炘、高雄捐血中心主任洪啟民、花蓮捐血中心主任王雲龍、台北捐血中心醫務組長謝輝和及高雄捐血中心技術督導潘玫玲等。
4. 2013 年第 1 次亞太血液連線（APBN）會議於 5 月 31 日至 6 月 1 日在荷蘭的阿姆斯特丹舉行，由執行長魏昇堂及台北捐血中心主任洪正昇代表參加；第 2 次會議於 11 月 29 日至 30 日在馬來西亞的吉隆坡舉行，由執行長魏昇堂、副執行長楊炳炘、高雄捐血中心主任洪啟民及花蓮捐血中心主任王雲龍代表參加。

捐血志工　傳遞愛心

捐血志工除了平日積極參與捐血外，也協助各捐血中心加強宣導及服務捐血人。今年晉見總統的代表中有位曾貴錠先生除了定期捐血外；也是三重捐血室的愛心志工，捐血高達 1,000 多次。服務成果受到肯定。

一年來各中心志工榮獲獎項如下：

- 台北捐血中心：張永振先生榮獲「內政部志願服務績優銀牌獎」；劉安洸與林根德先生則分別榮獲「內政部志願服務績優銅牌獎」。





彭佳慧小姐感謝擁抱視障捐血人喻家貞，並致贈感謝卡

- 新竹捐血中心：陳梅香女士榮獲「新竹縣衛生保健志工金質獎」；廖素蘭女士榮獲「新竹縣衛生保健志工銀質獎」。
- 台南捐血中心：台南志工隊獲頒「臺南市政府102年志願服務績優團隊獎」；嘉義志工隊隊長林居樹先生榮獲「102年內政部全國志願服務銀質獎」；張耀輝先生及王燈清小姐分別榮獲銅質獎；楊明鎮先生榮獲「雲林縣政府102度績優志工金質獎」及「雲林縣102年度地方衛生保健績優志工獎」；楊美玲小姐榮獲「雲林縣102年度地方衛生保健績優志工獎」。
- 高雄捐血中心：高雄捐血中心志工隊榮獲「高雄市102年衛生保健志願服務業務評鑑」優等獎；黃美枝、薛麗慧、李秀勤小姐及陳皆得先生分別榮獲「高雄市志願服務金質徽章」；鍾禮聰、謝耀進先生及陳涵宣小姐分別榮獲「高雄市志願服務銀質徽章」；張耀華、吳國鐘先生及馬郁慎小姐分別榮獲「高雄市志願服務銅質徽章」。
- 花蓮捐血中心：廖慧文先生榮獲衛生福利部頒發「102全國衛生保健績優志工愛馨獎」。

此外，各捐血中心辦理各項捐血活動時，極力安排學生志工參與。除了建立正確的捐血觀念外；也鼓勵年輕人積極參與公益服務，培養熱血助人的精神。

網路宣導　行銷主流

近年來，網路已成為所有宣傳、行銷及公關的利器。不同於過去以電視及報紙為主要媒體的時代，目前各類新聞媒介也大幅以網路資訊為主要消息來源。

除了透過我們的官方網站披露各項最新活動訊息之外，也可以在網站查詢各地的捐血地點；疾病感染危險區的規定；藥物及手術的限制；以及捐血資料查詢等等。此外，也提供醫事人員專區，讓醫院端也可以在網站上查詢相關會議資料。

兒童版則以寓教於樂方式，強調捐血觀念往下紮根的重要性。另外，在「愛捐血」網站，也提供民眾分享捐血心情及反應意見的管道；同時，以節慶變化版面讓網站更豐富生動；也不定期的增加新訊息，讓捐血人在這裡可以知道各地活動訊息及捐血新知。官方網站自2011年改版以來，已有500萬以上瀏覽人次；愛捐血網站自2010年開站至今，也已突破300萬人次使用。

在社群發展已經超越過去使用E-mail這類單向、被動且非即時的工具後，使用者漸漸習慣朝多元、多向、多功、即時的社群工具靠攏。繼Plurk、Twitter後，FB和微博提供功能更強大的平台，儼然成為現階段不可取代的網路主流。也因此，各捐血中心也都各自在FB上成立了專頁，讓民眾可以更方便的獲知訊息以及互動；不僅更快速，且對民眾來說，只要上FB就可以看到捐血活動訊息，既主動又便利。



中山工商重視捐血活動

智慧型手機已相當普及，行動工具也漸漸改變民眾對電腦的使用習慣；因此，在有限的人力及經費之下，我們也製作了行動版的捐血地點查詢系統，讓捐血人想捐血的時候，使用手邊的行動工具，就可以清楚查詢到各地的捐血活動地點。

網路宣傳工具的不斷更新。未來，希望藉由最新的科技始終與民眾一同前進，提供更好的平台和工具也就是提供更好的服務。



2013 年 6 月 14 日世界捐血人日 - 高雄捐血中心捐血拯救生命禮物巨幅拼圖

Give Blood With Love, If Not Us But Who

To alleviate the blood shortage throughout the Chinese Lunar New Year and to amass medical blood, the month before the Chinese Lunar New Year has been designated as the "Blood Donation Awareness Month", each blood donation center will organize various blood donation activities during this month, at the same time respectfully requesting the President to publish a "Blood Donation Awareness Letter," calling on the nation to donate blood enthusiastically. Because 2013 is the year of the Snake in the Chinese culture, so the main theme for the blood donation awareness month was to focus on self-sacrifice, with the Chinese character of "sacrifice" and "snake" being homophones. A press conference was held on January 4th with guest speakers Ms. Jia-Jen Yu, Ms. Ying-Shan Chen, and Ms. Chen's mother sharing their stories on saving lives through blood donation. Ms. Yu is a zealous visually impaired blood donor, and Ms. Chen's family has five Rh negative blood-typed relatives. Well-known singer Julia Peng was also invited to share her recent story about how 3,000cc of blood had saved her life from the postpartum hemorrhage she incurred while giving birth. Another story is that Ms. Yu-Jen Chang told us about her life long journey of being a regular blood transfusion recipient ever since three months old due to thalassemia. Together, the guest speakers expressed their gratitude to all blood donors, and it was a heartwarming scene .

Blood Donation - A Gift of Life

The theme of the 2013 "World Blood Donor Day" was "Every Blood Donation is a Gift of Life." The Foundation made a special comparison between Taiwan and the rest of the world on blood transfusion related data. The statistics were obtained from the World Health Organization (WHO). The comparison had shown that Taiwan is well recognized and even surpassed other advanced nations in promoting voluntary non-remunerated blood donation and blood safety.

The "blood bag tree of life" representing "A Gift of Life" was promoted at the press conference, and the leading woman donor in the nation, Ms. Chiu-Chuan Wang was also invited along with two young individuals, Wen-Hsiung Lai, Yung-Jia Chen, and their families, to share their stories on blood donation. Ms. Wang's blood donation stories were not only highly reported in the Taiwanese news media, but were all over the Chinese Xinhua Net, and the CNA Foreign Press Center even reported it in English.



國際獅子會300E1區贈送高雄捐血中心「熱血一號」血液運送車乙輛，由本會執行長魏昇堂代表受贈



Business and Organization Joint Efforts

For years, businesses and organizations have strongly supported the cause of blood donation and actively organized various blood donation activities. This year, the national organizations, military, and medical institutions have donated a total of 730,981 units of blood, which is 29.35% of the total blood donation. Details as followed :（250cc per unit）

Organization	Taipei	Hsinchu	Taichung	Tainan	Kaohsiung	Hualien	Total
The Lions Club	142,793	78,763	134,267	27,554	13,468	12,507	409,352
The Kiwanis	28,584	12,871	53,689	7,175	2,788	2,876	107,983
The Armed Forces	9,629	9,610	10,102	24,772	17,585	6,183	77,881
Buddha's Light International Association, R.O.C	17,667	9,007	15,199	8,382	12,289	2,939	65,483
The Rotary Club	10,204	2,904	6,711	12,896	22,316	3,655	58,686
Medical Care Institutions	1,710	302	3,298	3,902	984	1,400	11,596
Total	210,587	113,457	223,266	84,681	69,430	29,560	730,981

In addition, businesses also regularly host large national blood donation events to benefit patients in need of blood. Nationwide blood donation activities for 2013 are as follows : (chronologically ordered)

1. Taiwan High Speed Rail Corporation : January 4th~18th. Held at the Taipei Nangang Head Office, the Taichung Station, and the Kaohsiung Station. 542 units of blood (250cc per unit) received from the three events.
2. Fubon Charity Foundation : January 8th~25th. The theme was "Fubon love, it's really awesome." 4,124 units of blood received from the 27 events.
3. TASTy Restaurant : "Calling For A Million Passionate Young'uns" event was held from January 24th~26th and June 14th~30th, with 63,503 units of blood received.
4. The Capital Group : January 27th~March 22nd . The theme was "Rallied love, the charity of passing on happiness." Received 924 units of blood from the 8 events.
5. Shin Kong Group : February 20nd~24rd. The theme was "I donate blood, let the love unite. " Received 1,317 units of blood from 8 events.
6. Chunghwa Post Co. Ltd. : February 21st~ March 20th. The theme was "Sending warm blooded passion, Postal Life Insurance Blood Donation Month." 29,288 units of blood was received from 240 events.
7. Nan Shan Life Foundation : May 16th~ August 30th. The theme was "2013 Nan Shan Life blood Donation Event" 13,786 units of blood received after 97 events.
8. National Conscription Agency (Ministry of the Interior) : June 1st~September 30th. To encourage the personnels in the Alternative Military Service Program to donate blood, the theme was "offering love and duties, one million cc in the summer." 8,964 units of blood was received from this period.
9. Cathay Charity Foundation : June 26th~ September 7th. The theme was "2013 Summer Blood Donation Event." 14,909 units of blood received from 73 events.
10. Taiwan Life Insurance Co. Ltd. : July 5th~ September 21st. The theme was "Taiwan Life 2013 Enthusiastic Collection." 725 units of blood received from 10 events.

11. Global Life Insurance Co. Ltd. : July 19th~26th. Held in Taipei, Taichung, and Kaohsiung. The theme was "Global Life Insurance 20th Anniversary Blood Donation Event." 385 units of blood received from 3 events.
12. Ho Tai Motor : August 2nd~27th. The theme was "2013 Ho Tai Motor National Blood Donation Month." 4,381 units of blood received from 61 events.
13. Lungyen Charitable Foundation : August 2nd~October 22nd. The theme was "Heat up the passion, pass on love and hope." 676 units of blood received from 7 events.
14. Feng Chia University Alumni Association : November 2nd~16th. National Alumni Synchronizing Blood Donation Event. 3,216 units of blood received from 22 events.

Devote your heart and effort to give back to the community

Over the years, organizations, businesses, and civil groups have been helping with money and effort not only to host various blood donation campaigns, but also enthusiasticly donated various supplies. This year, all Blood Centers raised a total of five blood donation buses, three blood product transport vehicles, two administrative publicity vehicles, and 159,835 blood collection bags. Details as followed :

Item / Blood Center	Blood Bag (piece)	Blood Donation Bus	Blood Transport Vehicle	Administrative Publicity Vehicle
Taipei Blood Center	76,620	0	0	0
Hsinchu Blood Center	0	2	1	0
Taichung Blood Center	67,575	3	0	1
Tainan Blood Center	1,684	0	1	0
Kaohsiung Blood Center	5,856	0	1	0
Hualien Blood Center	8,100	0	0	1
TOTAL	159,835	5	3	2

Blood Donation Outstanding Merit Recognition

Each Blood Center held their outstanding merit recognition ceremony between April and May within their respective regions. There were 113 schools receiving the recognition this year, and were awarded certificates from the Ministry of Education; and community organizations a total of 336 units were awarded certificates from the Ministry of the Interior; and the National Armed Forces a total of 35 units were awarded certificates from the Ministry of National Defense; and another 142 units or individuals received outstanding contribution recognition certificates from our Foundation. Personal outstanding merit recognition: 5,621 people to donate whole blood from 100 to 410 times; apheresis blood donation from 100 to 1,600 times were 5,244 people, of which, 153 people to donate over 1,000 times. Also, apheresis blood donation of 500 times or above; male whole blood donation of 150 times or above, female whole blood donation of 100 times of above, the above mentioned outstanding donors were 464 people (212 whole blood; 252 apheresis blood donation), and not only did they receive a recognition certificate from the Ministry of Health and Welfare, they were also awarded an honorary medal by the Chairman of the Chinese Blood Donation Association.

Each Blood Center's Recognition Ceremonies took place at the following times and locations :

- Taipei Blood Center on April 26th / Multi-Functional conference hall in New Taipei City Administration center.
- Hsinchu Blood Center on May 10th / International conference hall in National Guest Hotel in Hsinchu city.
- Taichung Blood Center on April 25th / Chau-Gun City Restaurant in Taichung City.
- Tainan Blood Center on April 18th / Art hall in Life Artwork Library in Tainan City.



- Kaohsiung Blood Center on April 27th / International conference hall in National Kaohsiung Ocean Technology University.
- Hualien Blood Center on May 17th / One restaurant in Taidon City.

The 2012 annual outstanding blood donors representative met with the president on December 18th at the Presidential Palace. Our outstanding blood donor this year is Mr. Ren-Kuen Kuo (43 years old), a police officer from the Yunline Douliu police station. Mr. Kuo has been donating blood since he turned 18 as a senior in high school with donation count of more than 800 times. He feels that to save a precious life, makes him happier than to catch a thief; to be able to regularly donate platelets, he is very strict on his health management, he said that donating blood is one of the biggest secret to a good health.

Satisfaction Survey - Value the needs of the blood donors

The 2013 "Blood donation service needs and satisfaction survey" was fully conducted from November 11th to December 4th, the survey focused on qualified donors with over one hundred whole blood donations that have not returned to donate in the past two year. This survey was conducted by mailing the questionnaires, and a total of 1,078 questionnaires were sent; 262 valid questionnaires were returned, with a return rate of 24.3%.

After statistical analysis, the main conclusions are :

(1) The reason for not donating in the past two years, in terms of personal reason with "suffering from cancer or other sicknesses/ injuries and need surgery or medication which is unable to donate blood," being the highest; in terms of blood donation service "Can not find a convenient location to donate blood," being the highest (2) The highest satisfaction was on "blood donation facility was clean and comfortable," at 93%; while the lowest satisfaction was on "health diagnosis list on the blood donor registration form" at 70.9% (3) Blood Donors felt the most important item was "for the blood sampling technicians to have excellent needle insertion techniques."

It is worth mentioning that 99.1 % of the blood donors surveyed "agree" if they are in good physical conditions, they are willing to donate blood regularly. In addition, 76.3% of the blood donors "do not agree" that the souvenirs affect the willingness to donate blood; only 23.7% of the blood donors "agree" that the souvenirs will affect the willingness to donate blood.

International Exchange to Acquire New Knowledge

In recent years, the Foundation has been actively participating in various international conferences to learn new relevant knowledge. The international conferences we have participated in the year are as followed :

1. The 23rd International Society of Blood Transfusion (ISBT) European Regional Conference from June 2nd to 5th, held in Amsterdam, the Netherlands. Vice Chairman Jin-Chuan Yeh led a team of delegates composed of CEO Sheng-Tang Wei, Director of the Taipei Blood Center Mr. Cheng-Sheng Hung, Director of the Taichung Blood Center Chi-Ling Lin, technical team leader Shuan-Huei Wang, research technical specialist Shuan-Chong Bai, and the Hsinchu Blood Center business supervisor Chong-Yu Wang.
2. The 2013 American Association of Blood Banks (AABB) Annual International Conference was held from October 12th to 15th in Denver, Colorado, United States. Director of Tainan Blood Center Guang-Chao Tsai led a team of delegates composed of technical specialist Meng-Hua Yang from the Taipei Blood Center, physician in charge from the Hsinchu Blood Center Fan-Fan Meng, physician in charge from the

Kaohsiung Blood Center Shi-Bin Tseng and technical specialist Shiao-Lin Lin.

3. The 24th International Society of Blood Transfusion (ISBT) Asia Regional Conference was held from December 1st to 4th in Kuala Lumpur, Malaysia, CEO Sheng-Tang Wei led a team of delegates composed of vice Deputy CEO Bing-Shin Yang, Director of the Kaohsiung Blood Center Chi-Min Hong, Director of the Hualien Blood Center Yun-Long Wang, the Taipei Blood Center medical supervisor Huei-Huh Hsieh and the Kaohsiung Blood Center technical inspector Wen-Ling Pan.
4. The 1st Asia-Pacific Blood Connection (APBN) conference was held from May 31st to June 1st 2013 in Amsterdam, the Netherlands. CEO Sheng-Tang Wei and Director of the Taipei Blood Center Cheng-Shen Hung were the representing delegates; The 2nd conference was held from November 29th to 30th in Kuala Lumpur, Malaysia, and the representing delegates were CEO Sheng-Tang Wei, deputy CEO Bing-Shin Yang, Director of the Kaohsiung Blood Center Chi-Min Hung, and the Director of the Hualien Blood Center Yun-Long Wang.

Blood Donation Volunteers spread the love

Aside from active participation in regular blood donation advocacy, blood donation volunteers also assist the Blood Centers to strengthen and service blood donor affairs. One of the honorary recognized donors who met with the President this year, Mr. Kuei-Ding Tseng is not only a blood donor with more than 1,000 donations, but a volunteer at the Sanchong Blood Station. Their services were appreciated and recognized.

Internet marketing as mainstream advocacy

In recent years, the Internet has become an effectiv tool for publicity, marketing and public relations. Unlike in the past when television and newspaper served as mainstream media, today, the internet has become the main source of information for all news media.

Not only can one find out about the latest activities through our official website, the blood donation locations can also be inquired; provisions on high-risk infectious epidemic zones; medication and surgery limitations; and blood donation information, etc. In addition, there is a medical personnel area on our website for hospitals to search on related conference information; Children's area is designed in entertaining and educational ways, emphasizing on the importance of blood donation starting from the foundation. To add, on the "I- Blood" Donation website, people can post their feelings and suggestions on blood donation; by changing the website layout according to festivals and holidays made it more lively; information is refreshed accordingly, to notify blood donors about blood donation activities and knowledge. Since the website revision in 2011, there are more than five million visits to the site; I-Blood Donation website has exceeded three million visits since its launch in 2010.

Social media development has gone beyond the use of E-mail and such one-way, passive, and non- real-time tools that once dominated in the past, user habits are shifting toward multivariate, multidirectional, multifunctional, and real-time social media tools. Facebook and Weibo provide more powerful platforms after the rise of Plurk and Twitter, evolving into irreplaceable mainstream internet giants. As a result, our blood centers have set up each of their own Facebook group pages so that people can learn information and interact with more ease; not only quicker, and for more people,



being able to see blood donation event news on Facebook is proactive and convenient.

Smart phones have become very common, and mobile gadgets have gradually changed the way we use computers; therefore, we have produced a mobile blood donation location query system under limited manpower and funding, that allows people to use mobile gadgets at hand to find blood donation event locations whenever they wish to make donations.

Internet marketing tools constantly evolve. In the future, we hope to provide better services with the most advanced technology, platforms, and tools.



嘉義 8 大社團組隊一同為「捐血有愛、捨我騎誰」響應捐血活動



資訊處

Information Technology

個資保護 全員動起來

個人資料保護法及其施行細則正式公告後，個人隱私受到更多元的保護，這項法令對擁有大量個資的機構衝擊頗大，積極投入資源建構資訊安全系統，研擬政策與相關保護措施乃勢在必行。

本會於 102 年初即成立個資管理委員會，是本會暨各捐血中心個資保護推動之最高指導單位。於各捐血中心設立個資保護推動組，包含事件應變小組、資安小組、稽核小組、文管小組及個資聯絡窗口。各捐血中心在盤點教育訓練後即展開全面性個資盤點與風險評鑑作業，確認各業務單位所擁有的個資檔案及紙本資料，都受到妥善的保護與管理，同時進行資訊資產盤點，擬訂個資保護對策。

對於個資委外處理之業務也進行稽核作業，分別對捐血檢驗報告及熱血雜誌委外印製寄發廠商查核，以確保協力廠商對個資之管理能力，能善盡個資保管人的職責，保障本會捐血人之權益。

個資保護是組織內全員的責任，透過持續的教育訓練以提升員工對個資保護之正確觀念。會本部暨各捐血中心 102 年度分別邀請律師、政府官員、技術顧問等專家作專題講座，共辦理 25 場次訓練課程，並要求所有員工網路自我學習，課後參加評量，以確認學習成效。

為落實個資保護措施，必須重新檢視現有日常作業流程標準程序書的完整性，本年度計完成 20 餘份標準程序書的增修，期能將個資保護政策，融入作業環節。

資通安全 持續加強

網路與生活已密不可分，捐血人可以透過網站瞭解本會暨各捐血中心即時訊息、查詢個人捐血資料，檢驗報告以電子郵件方式寄發的比率已達捐血人次的百分之六十，為提升個人資料安全，自 103 年起，在開啟檢驗報告前，必須先輸入密碼以確認身分，以確保個人資料受到應有的保護。

強化資通安全是持續性的工作，本會 102 年度全面提升網路頻寬，建構頻寬管理設備及更新防火牆，以有限資源做最有效的運用，並做嚴謹的網路通道把關，期使本會之網路安全無虞。

資訊系統更新

捐供血管理資訊系統之重新建置是本會這幾年的重點工作項目之一。在完成系統差異分析後，102 年度繼續依作業流程進行參數設定，已完成資料轉換的欄位對應關係討論，配合本會業務需求作部分客製化的模組與程式設計已有雛型，仍待持續推動。



Privacy Information Protection Movement

After the official announcement of the Personal Data Protection Act and its enforcement rules, privacy has gotten more multivariate protections. The act substantially impacts the organizations containing massive personal information. It is imperative to devote resources to construct information security systems, develop policies, and protective measures.

The personal data management committee was established in the Foundation at the beginning of 2013, as the highest directing juristiction of all blood centers on personal data protection enforcement. Personal data protection enforcement teams are established in six blood centers, including the event response team, information security team, audit team, file management team, and the personal information point of contact. The blood centers are to fully proceed with personal information inventory management and risk assessment after their inventory management trainings, to verify all personal information electronic files and paper files are under proper protection and management. Concurrently, we are to proceed with information asset inventory management and to draw out personal data protection measures.

Audits on all outsourced businesses with high volumes of personal data are conducted. Blood screen test reports, Hotblood Magazine printing / mailing companies are audited to ensure their personal information management capabilities, to fulfill our duty of safeguarding the personal data and to protect the right of the blood donors.

Personal data protection is the responsibility of all staff within the Foundation, and correct concepts of personal data protection are enhanced through continuing education. In 2013, the blood centers invited attorneys, government officials, technical advisors, and other experts to hold seminars, with a total of 25 sessions, at the same time required all employees to take online learning sessions, and to take after-session assessments, in order to verify the effectiveness of their learning.

To implement personal data protection measures, the current standard daily operational procedure manual must be re-examined for updates. More than 20 sets of the SOP manual updates are to be completed this year, projecting to integrate personal data protection measures into the operating procedures.

Continue to strengthen information security

It is inseparable between one's daily activities and the internet. Blood donors can obtain instant news updates on the blood centers', and to review their personal donor data. Test reports are being emailed to 60% of the blood donor population. Beginning from 2014, one must enter a personal identification password prior to open the electronic test report, to properly enhance and provide personal information.

Strengthening the information and communication security is an ongoing work. The Foundation upgraded the network bandwidth, constructed bandwidth management equipments, and updated the firewall in 2013, to achieve optimal implantation of the limited resources available. Internet channels will be strictly guarded to ensure utmost safety within our network and database.

Information System Update

The blood collection and supply management system reconstruction has been one of our focused projects in the recent years. Upon completion of the system variance analysis, parameter setting will continue to follow operation procedures. Discussion on the field correspondence due to data conversion is complete. Customized modules and program design has been prototyped according to our business needs, and will continue to proceed.



財務處

Finance

本會財務狀況

經費收入：業務收入包含國血製劑及工本材料費收入；捐贈收入主要係捐血車或血液運送車之打造及血袋、點心、紀念品之捐贈；其餘為利息收入及其他收入，主要係廠商賠償不良品貨款、研究用血收入及補助收入。

經費支出：業務費用主要為國血製劑相關費用、血袋費、檢驗試劑費、消耗費及捐血人紀念品等；研究發展費主要為人員培育、研究消耗器材藥品及圖書費等；管理費用主要為辦公費、修繕維護費、租金支出及雜支等；人事費用為員工薪餉及加班費；其餘費用為社會服務費、財產報廢損失及員工退撫準備金。

善用財務資源

經費結餘佔總收入 2.87%，視財務狀況及董事會決議，提撥適當金額至血液品質研究發展專戶，俾利本會執行提升血液品質計畫。

強化財務管理

落實審查帳務、原始憑證及相關案由紀錄與表單，經費收支均依「經費管理及內部審核電子化作業」流程規範及標準作業程序進行，另於 12 月底實施資產盤點；委請會計師查核帳務並出具財務報告，經董事會審議後提報主管機關衛生福利部核備。



The Financial Status

Revenues: Revenues of the Foundation mainly come from processing fees of blood products and blood components. Contributions are primarily in the forms of blood mobiles, blood transportation vans, blood bags, and refreshments for blood donors. Other sources of incomes include incomes from interests, compensations from manufacturers for defective products, incomes from blood for research use, and subsidies from government.

Expenditures: Operational costs are direct costs related to the manufacturing of blood products, costs of blood bags, reagents for laboratory testing, supplies, and souvenirs for blood donors. Expenditures for research and development involve training costs, costs of devices and reagents for research, and books and journals. Administration costs include office management, repair and maintenance, rentals and miscellaneous. Personnel costs are mainly salaries and overtime payments. Others include loss due to scrapped properties and reserves for the retirement of employees.

Adequate Use of Financial Resources

The balance of the year is 2.87% of the total revenues. By resolutions of the Board of Directors, certain amount of the balance is allocated to the specific account for research and development on blood quality.

Strengthening of Financial Management

Financial auditing is strengthened. Invoices, records and forms and income balances are handled according to regulations of the financial management and internal auditing electronic operational procedures and standard operational procedures. Inventories of properties are taken in December each year. Accountants are invited to audit accounts and make reports. Accounting reports are submitted to the Board of Directors for review and approval, and then forwarded to the Ministry of Health and welfare for approval.



綺麗號血液運送車捐贈儀式，由花蓮捐血中心主任王雲龍代表受贈



行政處

Administration

發揮組織功能

本會為依據醫療法設立之醫療財團法人之組織，董事會置董事13人及監察人1人，因林董事長國信於2月11日病逝，董事會於3月8日改選，由胡惠德繼任董事長。本年於3月8日、5月21日、11月26日共召開3次會議，充份發揮監督領導本會之權責。由於第6屆董事會102年12月31日任期屆滿，並依規定籌組董事提名委員會，於11月26日完成改選第7屆董事與監察人。

本會各項政策及業務之推行，由各捐血中心依統一規定辦理，胡董事長召集捐血中心主任及處長於4月23日、9月12日舉行擴大工作會報，加強內部溝通及管理，以維持本會之永續發展。

重視員工在職教育

員工培訓為年度工作計畫重點，以採血、供血、檢驗、成分、公關企劃、財會、資訊、行政等在職教育為主，辦理方式包括專家學者演講、讀書會、與學術機構合辦檢驗繼續教育研討會、派員參加國內外學術單位有關之會議及課程以提升工作人員專業之素質。

改善作業場所及設備

本會暨各捐血中心作業場所，依相關法規，視財務狀況籌措購置，本年繼續高雄捐血中心屏東捐血站之遷建規劃，另依業務需要，進行各作業場所之整修及設備之汰換，其中部分設備來自熱心者之捐贈。

強化集中採購

本會各捐血中心係因應地區需要設立，行政事務各依權責分別管理，因屬國內唯一執行捐供血業務的醫療機構，部分特殊藥品或耗材，須委託供應商進口或訂製，為有效降低採購成本，就需求數量大且可通用的設備、器材、物料等，以聯合採購方式集中辦理，於節約經費開支有具體成效。



Exert organizational functions

The Foundation is a medical corporation established under the Medical Care Act. The Board of Director has 13 members and one supervisor, to supervise and direct the operation of the Foundation and the blood centers. Due to the passing of our chairman Dr. Guo-Shin Lin on February 11, the Board of directors held a re-election on March 8th in accordance to the Medical Act. Dr. Huei-Teh Hu was elected as the new Chairman and had called for three board meetings this year on March 8th, May 21st, and November 26th, fully utilized the powers of supervision and leadership. The sixth term of the Board of directors ended on December 31st, 2013, and the Board Nomination Committee was organized to submit candidates list to the Board of directors. Finally, the Board of directors completed the re-election of the 7th term directors and supervisors on November 26th.

The policies and business operation of the Foundation are carried out by the blood centers following the standard operational procedures. To promote internal communication and management, meetings of directors of the blood centers are called regularly, this year two times on April 23th and September 12th for business discussion.

Emphasis on staff professional training

Staff training is the focus of the annual work plan. Blood collection, blood supplying, laboratory testing, blood components, public relations planning, finance and accounting, information technology, and administration were the main professional trainings. Training channels include expert seminars, book clubs, continuing education conferences with academic institutions, and sending staff to attend international academic conferences and courses to improve the staff professional quality.

Renovation of Workplaces

Workplaces of the Foundation and the blood centers are procured by relevant regulations and financial conditions. The land has already been procured for the Pingtung Blood Station under the plans for the extension of the Kaohsiung Blood Center. Workplaces are repaired and instruments and facilities renewed according to needs. For limited resources, some facilities are contributed by enthusiastic donors.

Strengthening the centralized procurement

The blood donation centers are set up in response to local needs, and their administrative affairs are managed independently. Since we are the only medical institution in the blood business, some special medicines or supplies rely on supplier to import or customize. To effectively reduce procurement costs, equipment, tools, and materials with high demand quantities are joint procured for centralized processing.



和泰 3 號捐血車捐贈儀式，由新竹捐血中心主任楊炳炘代表受贈



大事記

Chronicles





大事記

Chronicles

一月

01/01
- 為加強服務並鼓勵首次捐血人，本會特別印製「首次捐血識別貼紙」共190,000份配送至各中心運用。
- 為因應個資法公佈實施，本會停止醫院用血回報作業。

01/04~18
- 台灣高鐵公司於台北、台中及高雄地區各舉辦一場捐血活動，共募集血液542單位。（每單位250西西）

01/05
- 台中捐血中心捐血月起跑活動於鹿港鎮公所舉行。會中由國際獅子會300C3區總監鄭浩宸頒獎表揚鹿港及福興地區捐血次數最高者各10名；彰化縣大彰興獅子會同時也捐贈血袋空袋1,000個，由台中捐血中心主任林啟靈代表接受，當日共募集血液257單位。

01/08~02/08
- 102年捐血月本會以「捐血有愛，捨(蛇)我其誰」為主題辦理捐血及宣導活動。並於1月4日召開捐血月記者會，會中邀請二位捐血人代表（視障捐血人喻家貞及Rh陰性捐血家族陳瑩珊小姐母女）分享捐血的感想及二位受血人代表（藝人彭佳慧及海洋性貧血張育禎小姐），分享她們感謝捐血人的心情故事。捐血月期間共募集血液252,192單位。
- 台北捐血中心捐血月活動起跑，分別於台大、峨嵋、公園、土城、忠孝號等捐血車舉辦「愛的抱抱血寶寶見面會」，約有195人拍照及上傳打卡。

01/08
- 台南地區102年捐血月記者會假台南市政府舉行，由市長賴清德、副市長顏純左、衛生局長林聖哲、捐血社團代表及屬蛇代表共計21位，籲請各界踴躍「熱血」助人。當天捐血月起跑活動共募集血液666單位。

01/08~25
- 富邦慈善基金會於全國27個分公司辦理「富邦有愛、10在好正」捐血活動，共募集血液4,124單位。

01/12
- 高雄捐血中心假前金捐血室舉辦111扶輪捐血月活動記者會。扶輪3510地區總監王仁孚、東北社長張山輝及高雄捐血中心主任洪啟民於會中致詞，並邀請視障捐血人劉重進及受血人張智鈞母女現身說法，當日共捐得血液194單位。

01/12、26
- 年代電視MUCH台及中天電視綜合台【真心看台灣】節目播出捐血人的感人故事，希望藉此將捐血月的訊息帶給民眾，並廣為宣傳。

01/13
- 台中捐血中心志工隊於臺中公園捐血車、中正捐血室舉辦「逗陣相招來捐血」活動，邀請女大學生趙苙妘及陳孟吟現場揮毫書寫春聯贈送給民眾，當日共募得血液328單位。



01/16
- 各捐血中心對所有血品全面實施擴大核酸檢驗（NAT），並自 2 月 1 日起全面供應經 NAT 檢驗合格的血品。

01/17
- 台北捐血中心於峨嵋號捐血車舉辦捐血月記者會，邀請男女熱血第一名的「志明」10 位和「淑芬」12 位齊聚一堂，共同呼籲捐血，獲得媒體競相報導。當天募集血液 146 單位。

01/22
- 本會召開「個資保護管理系統啟動會議」。

01/24~26
- 西堤牛排配合 102 年捐血月活動及世界捐血人日（6 月 14 日 ~26 日）舉辦「百萬熱血青年召集令」捐血活動，共募集血液 63,503 單位。



西堤牛排 -102 年熱血青年召集令記者會

01/25
- 新竹捐血中心於愛心樓舉辦 102 年捐血月「捐血有愛 捨我其誰 ~ 102 熱血甄嬛 捐血救人」活動。藉著熱門的電視連續劇「後宮甄嬛傳」之熱潮，主任楊炳炘與熱心捐血人共同以劇中人物打扮，呼籲年輕族群挽袖捐血，各大新聞媒體熱烈採訪報導。

01/27
- 高雄捐血中心與國興畜產公司假屏東市公所前廣場舉辦第 10 屆「熱情屏東人千人捐熱血」活動，並先於 1 月 23 日假屏東縣政府舉辦記者會，屏東縣副縣長鍾佳濱、國興畜產股份公司董事長林桂添、林姓宗親會理事長林宗山等多位貴賓共同參與。活動當日創下全國單一日最高捐血量 4,892 單位紀錄。

01/27~03/22
- 群益證券公司辦理「群益獻愛心　傳遞幸福公益」捐血活動，共募集血液 924 單位。

二月

02/02、03
- 金格金飾珠寶集團於台中捐血中心中正捐血室、臺中公園捐血車舉辦「寒冬送暖，金格送愛」捐血活動。這是該公司 4 年來第 5 度配合台中捐血中心舉辦捐血活動，本次活動共募集血液 2,018 單位。

02/03
- 高雄捐血中心主任洪啟民與東港安泰醫院榮譽院長蘇清泉立委至港西「屏東縣聖賢殿靈員行願慈善會」（善良宮）捐血活動為捐血人加油打氣，共募集血液 150 單位。

02/04~11
- 花蓮金財神投注站於花蓮捐血中心捐血室辦理捐血週活動，協助春節備血並贈送 200 張大樂透彩券。

02/14 ● 桃園捐血站舉辦「情侶夫妻同捐血送您幸福小龍包」情人節捐血活動。並有熱心捐血人桃園市民代表林國政先生熱情贊助，獲捐血人熱烈迴響，當天募得血液 100 單位。

02/20~24 ● 新光人壽為慶祝 50 週年，特別於全國 8 個地點辦理「我捐血　讓愛凝聚」捐血活動，共募集血液 1,317 單位。

02/21~03/20 ● 中華郵政公司於全國各地郵局辦理 239 場次「寒冬送暖熱血情　郵政壽險捐血月」捐血活動，共募集血液 29,288 單位。

三月

03/06~22 ● 本會辦理 102 年業務督導訪查。

03/08 ● 本會前董事長林國信先生 2 月 11 日於任內病逝，經第 6 屆第 11 次董事會辦理補選，由胡惠德董事當選董事長；葉金川董事當選副董事長。

03/13 ● 林前董事長國信先生公祭典禮上，獲行政院衛生署邱文達署長親臨主祭，為感念其在醫界及血液事業的重大貢獻，特追頒「一等衛生獎章」。



台灣血液基金會故董事長林國信（右二）於民國 62 年率台大醫護人員至大專院校採血

03/24 ● 彰化東區扶輪社暨金可國際集團共同捐贈大型捐血車乙輛予台中捐血中心，由本會董事長胡惠德代表接受。捐贈儀式於中興大學舉行，國際扶輪社 3460 區總監周明智、彰化縣第一分區助理總監陳永昌、彰化東區扶輪社社長章政城、本會執行長魏昇堂、台中捐血中心主任林啟靈等人均出席此次盛會。

03/29 ● 花蓮捐血中心台東捐血站前往綠島辦理捐血活動，共募得血液 97 單位。

03/31 ● 雲林縣虎尾、虎女獅子會等單位聯合舉辦大型年度捐血活動，當日共計捐得血液 3,004 單位。



四月

04/16
- 南京市衛生局管理考察團由南京市組織宣傳處處長楊大鎖領隊，一行 26 人參訪基金會、台北捐血中心南海捐血室與峨嵋號捐血車。

04/18
- 台南捐血中心 101 年度捐血績優表揚大會於台南市生活美學館演藝廳舉行。表揚捐血績優學校 15 單位、捐血達 1,000 單位以上工商社團 74 個、國軍部隊 8 個、全血捐血百次以上 798 人及分離術捐血達百次以上 796 人。

04/25
- 台中捐血中心 101 年度捐血績優表揚大會在潮港城國際美食館舉行。今年共有 599 位百次以上分離術捐血人、1,298 位百次以上全血捐血人、150 個社團、16 個學校、11 個軍方單位及 46 個特殊貢獻團體受獎。台中市政府衛生局長黃美娜、社會局王秀燕局長及陸軍第十軍團政戰副主任張勉上校均出席頒獎。



台中市 86 路公車司機吳旻璁先生經常快樂捐血

04/26
- 台北捐血中心 101 年度捐血績優表揚大會假新北市政府三樓多功能集會堂舉辦，表揚全血及分離術 100 次以上捐血人及績優團體單位。新北市政府副市長侯友宜、教育部終身教育司副司長黃月麗、行政院衛生署副署長林奏延及台北市政府衛生局醫護管理處副處長杜仲傑蒞臨頒獎。

04/28
- 高雄捐血中心 101 年度捐血績優表揚大會於國立海洋科技大學國際會議廳舉辦。立法委員黃昭順、教育局督學室主任張坤錄、衛生局副局長蔡龍居、獅子會 300E2 區總裁莊明昇、扶輪 3510 地區祕書長鄭福全、同濟會台灣總會高屏區主席林存城等均出席並頒獎。

五月

05/01
- 台南捐血中心於佛光山嘉義會館舉辦 101 年度雲嘉地區捐血績優表揚大會，由副董事長葉金川主持。

05/04
- 北京大學、北京師範大學、北京清華大學、中國人民大學及對外經濟貿易大學等共 36 位碩博士生參訪新竹捐血中心。

05/06~31
- 埔里金田水果行為感念農民辛苦及捐血人的愛心，舉辦西瓜節捐血活動；凡至埔里站捐血者即贈送西瓜一顆。

05/07
- 公共電視「下課花路米」節目至台北捐血中心拍攝捐供血流程。

05/10
- 新竹捐血中心 101 年度捐血績優表揚大會假新竹國賓飯店舉行。本次大會由胡董事長親臨主持，新竹縣縣長邱鏡淳、新竹市副市長游建華、新竹市衛生局長洪士奇等貴賓均蒞臨頒獎。

05/15
- 嘉義大學微生物免疫與生物藥理系 46 名學生在金立德博士帶領下參觀台南捐血中心嘉義捐血站及嘉義公園捐血車。

05/16~08/30
- 南山人壽慈善基金會舉辦「2013 南山人壽捐血活動」共 97 場，捐得血液 13,786 單位。

05/17
- 花蓮捐血中心 101 年度捐血績優表揚大會假台東市一家餐廳辦理。當日台東縣縣長黃健庭、台東市市長陳建閣、台東縣衛生局長盧道揚等地方首長均蒞臨頒獎。

05/23、24
- 大陸河南省紅十字會血液中心一行 8 人，分別參訪台北捐血中心及台南捐血中心。

05/31~06/01
- 亞太血液連線（APBN）2013 年會議假荷蘭阿姆斯特丹舉辦，由執行長魏昇堂代表出席。



熱血馬拉松長跑好手謝裕權（左 6）完成第 1,000 次捐血，好友一起參加捐血公益

六月

06/01
- 由台北市廣告代理商業同業公會主辦之「愛 • 公益」大專院校廣告科系公益廣告認養活動，本會由復興商工廣設科認養並義務設計燈箱廣告，並由合和媒體集團贊助刊登。燈箱廣告自 6 月 1 日起在捷運台大醫院站、景美站、新店區公所站；2 個公車候車亭（羅斯福路和平東路口、民權西路大龍街口）及公益列車（捷運車廂內廣告）刊登。台北市廣告代理商業同業公會於 6 月 3 日假台大校友會館舉辦記者會，由公關處叢處長代表前往致贈感謝牌給 4 個贊助單位。

06/01~09/30
- 內政部役政署為鼓勵全國替代役男踴躍捐血，舉辦「有情有役，暑期百萬 CC」捐血活動，捐得血液 8,964 單位。



06/02~05
- 國際輸血學會（ISBT）2013 年年會在荷蘭阿姆斯特丹舉行。本會由副董事長葉金川、執行長魏昇堂、台北捐血中心主任洪正昇、研究處技正白舜仲、台中捐血中心主任林啟靈、技術組長王萱慧、新竹捐血中心業務組長王瓊玉等參加。

06/04
- 財團法人中和福和宮及廣濟宮各捐贈 1,000 個空血袋予台北捐血中心，由業務組組長黃谷鶯代表受贈。

06/13
- 大陸廣西省柳州市紅十字會共 19 人參訪高雄捐血中心。

06/14
- 2013 年世界捐血人日主題為「捐血－拯救生命的禮物」，本會召開記者會並邀請最高次數女性捐血人王秋瓊及 2 位熱血青年陳勇嘉及賴玟翔至現場分享捐血心情；同時以具體數字展示台灣近年來捐供血優異的成果，並獲得國內外媒體報導，對開展台灣捐血事業於國際間的公益形象及知名度有正面效果。
- 台北捐血中心舉辦「2013 世界捐血人日」慶祝活動，由網友裝扮成復仇者聯盟等人物於西門町峨嵋號捐血車周邊，以熱鬧的遊街方式號召更多年輕人加入捐血行列。
- 台中捐血中心、警廣台中台及國際佛光會台中南屯分會合作舉辦「2013 世界捐血人日」慶祝活動。當天並頒發由朝陽科技大學傳播藝術系主辦的「愛的映象，有你真好」捐血海報設計比賽及「愛・延續」捐血微電影徵選比賽優勝者。
- 台南捐血中心在台南市遠東百貨公司廣場舉辦「2013 世界捐血人日」慶祝活動，邀請用血人邱惠美女士分享心情。
- 高雄捐血中心「2013 世界捐血人日」慶祝活動於高雄市政府舉辦，號召 370 位 6 月壽星與市長陳菊共同參與巨幅愛心拼圖。
- 花蓮捐血中心於花蓮縣警察局前籃球場舉辦「2013 世界捐血人日暨慶祝「警察節活動」。活動當天結合花蓮縣警局及公部門單位設攤做宣導，還有血寶寶遊街、捐血常識闖關、節目表演及捐血活動等。

06/15
- 高雄捐血中心參加台灣輸血學會期中學術研討會，成分課技術督導潘玫伶、企劃課鐘詠松、供應課張靜瑜各發表口頭論文。

06/26~09/07
- 國泰慈善基金會舉辦「2013 夏日捐血活動」共 73 場，捐得血液 14,909 單位。



台南捐血中心雲嘉地區表揚大會由本會副董事長葉金川（左三）主持

七月

07/01
- 為因應個人資料保護法之施行及業務需要，本會修正「捐血登記表及健康問卷」內容，自 102 年 7 月 1 日起全面更新使用，因版本更新，相關作業準則及電腦程式一併配合修正。

07/05~07
- 台灣輸血學會與高雄捐血中心合辦「血庫人員在職教育－基礎班」課程，高雄捐血中心參加人員共計 7 人。

07/05~09/21
- 台灣人壽保險股份有限公司舉辦「台灣人壽 2013 熱血大募集」活動共 10 場，捐得血液 725 單位。

07/07
- 一誠協力慈善會於台南公園舉辦年度捐血活動，當天共捐得血液 2,338 單位。

07/11
- 台東綺麗珊瑚捐贈花蓮捐血中心台東捐血站血液運送車乙輛，假台東捐血站前舉行贈車儀式，由主任王雲龍代表接受。

07/18
- 新竹矽谷扶輪社陳禮龍社長帶領 16 位國際學生志工參訪新竹捐血中心愛心樓。
- 台中市義勇消防總隊潭子分隊捐贈台中捐血中心行政宣導車乙輛，由分隊長吳明輝先生代表捐贈，義消潭子分隊顧問林昭正先生見證，台中捐血中心主任林啟靈代表接受。

07/19
- 國寶人壽捐贈 2,000 個空血袋予台北捐血中心，假忠孝號捐血車舉辦捐贈儀式，由業務組組長黃谷鶯代表受贈。
- 桃園縣玉山獅子會黃榮茂會長率領 6 位獅兄參訪新竹捐血中心愛心樓並贊助捐血人生日禮 400 份。
- 國際獅子會 300 D2 區 2013 ～ 2014 年度捐血活動於枋寮火車站前舉辦開幕起跑儀式，高雄捐血中心主任洪啟民親至現場感謝致詞。

07/19~26
- 國寶人壽於台北、台中、高雄三地舉辦「國寶人壽 20 周年慶捐血活動」共 3 場，捐得血液 385 單位。

07/25
- 新竹縣國勝國際同濟會會長何萬欽率領會兄參訪新竹捐血中心愛心樓並贊助生日禮 300 份。

07/26
- 台南捐血中心嘉義捐血站舉辦 102 年度雲嘉地區血液座談會，計有嘉義基督教醫院等 11 家醫院出席與會。

07/27
- 總統馬英九至台北捐血中心南海捐血室完成第 186 次捐血。

07/31
- 高雄市家事服務業職業工會志工隊由理事長莊蔡碧春帶領一行 8 人參訪高雄捐血中心，並捐贈空血袋 410 個。



國泰夏日捐血活動



八月

08/02
- 和泰汽車公司舉辦「和泰號捐血車」捐贈儀式，由新竹捐血中心主任楊炳炘代表受贈，並回贈「限量生肖血寶組」感謝和泰汽車公司董事長黃南光熱心支持捐血公益。
- 台北新莊獅子會贈送花蓮捐血中心捐血紀念品 15,000 份，轉贈宜花東地區捐血人，並於愛心樓舉辦記者會，計有更生日報等 6 家媒體採訪。

08/02~27
- 和泰汽車股份有限公司舉辦「2013 和泰汽車全國捐血月」活動共 61 場，捐得血液 4,381 單位。

08/02~10/22
- 龍巖慈善基金會舉辦「熱血沸騰 傳遞愛與希望」捐血活動共 7 場，捐得血液 676 單位。

08/06~13
- 本會進行板橋、埔里、台東等捐血站業務督導訪查。

08/07~13
- 金財神投注站於花蓮捐血中心捐血室辦理捐血週活動，並贈送 200 張大樂透彩券給捐血人，共捐得血液 280 單位。

08/08
- 萬芳醫院醫學系畢業生一般醫學訓練（PGY）學員共 28 位至台北捐血中心參訪見習。

08/09
- 新竹捐血中心承辦「102 年特派編採暨宣傳員在職訓練」，特邀請台灣電視公司記者顏章聖專題演講「新聞的寫與拍」。

08/12~17
- 嘉義市福添福慈善事業基金會於嘉義公園舉辦捐血活動，捐得血液 2,455 單位。知名導演魏德聖於 14 日至活動現場挽袖捐血，並贈送首捐族簽名棒球。

08/14
- 麗明營造公益捐血活動在台中市政府後廣場熱烈展開。台中捐血中心派出 4 輛捐血車服務民眾，麗明營造董事長吳春山率先挽袖捐血，當日共募得血液 822 單位。

08/16
- 102 年度第 123 梯次替代役男結訓典禮在成功嶺替代役訓練班舉行。內政部部長李鴻源親臨視察新訓替代役男參與捐血活動盛況，並頒獎表揚該梯次捐血次數最高前三名役男。

08/17
- 國際獅子會 300-C1 區捐血接力活動自 8 月 10 日至 10 月 28 日展開。開幕儀式於中正公園捐血室舉行，張淦璋總監率領內閣成員及各分會會長參加；台中捐血中心主任林啟靈也特別感謝國際獅子會 300-C1 區各獅友對募集血液的貢獻。

08/21
- 「兩岸青年菁英慈善公益研習營」37 位 NGO 領袖蒞臨新竹捐血中心愛心樓交流。由主任楊炳炘專題演講「台灣捐血公益發展」；業務組長王瓊玉導覽愛心樓，兩岸交流互動熱烈。

08/24
- 瑞唐建設公司捐贈「大型捐血車乙輛暨血液運送車乙輛」給新竹捐血中心，於基隆龍麒庭園會館舉辦捐贈典禮，由本會董事長胡惠德代表受贈。新竹捐血中心回贈「大型捐血車模型組」及「限量生肖血寶組」各乙份感謝瑞唐建設董事長羅福來先生熱心支持捐血公益。

08/28
- 國立台南護專 5 年級師生 33 位參訪台南捐血中心。

08/29
- 台中市長胡志強出席台中市糕餅商業同業公會於豐原慈濟宮舉辦的「捐血送月餅」公益活動。胡市長在大雨中特別感謝各界的愛心，並向捐血民眾及糕餅公會義工致意，當日共募得血液 1,022 單位。

九月

09/01
- 為因應衛生福利部公告血品價格調整，本會向醫院端收取之 1% 輸血感染愛滋病毒道義救濟金，採取每單位血品以無條件捨去小數點以下金額方式收取，並自 102 年 9 月 1 日起實施。
- 新竹縣縣長邱鏡淳、新竹縣議會議長陳見賢、副議長林為洲、國民黨新竹縣黨部主委劉敏謙、竹北市市長楊敬賜、議員何淦銘等地方首長，於愛心樓捐血室舉辦「健康久久 幸福久久」捐血活動，帶動社會公益典範。

09/02
- 大陸江蘇省衛生管理專家參訪團一行共 16 人至本會參訪，並參觀南海捐血室。

09/06
- 花蓮捐血中心志工廖慧文獲頒「衛生福利部愛馨獎」，於台大醫院國際會議廳接受表揚。

09/11
- 國際獅子會 300A1 區總監蔡璟柏率團至台北捐血中心參訪，並致贈空血袋 7,710 個，由台北捐血中心主任洪正昇代表受贈。

09/12
- 衛生福利部食品藥物管理署於 9 ～ 14 日主辦「國際醫藥品稽查協約組織（PIC/S）第 20 屆血液、組織及細胞專家圈會議」。為使各國衛生官員瞭解臺灣血品管理之發展及相關實務作業，特安排來自 22 國與會者共 47 人參訪台北捐血中心並進行模擬查核。

09/13
- 基金會臍帶血庫停止營運。

09/13、14
- 102 年捐血站長會議假埔里捐血站辦理。

09/14
- 嘉義鐵線製品股份有限公司舉辦「捐血心、鐵線情」活動，共募得血液 1,491 單位，創下嘉義地區單日捐血最高量。

09/17
- 台中捐血中心舉辦 102 年血液供應座談會，邀請台中榮民總醫院血庫主任林增熙醫生主講「以病人為中心之輸血策略、輸血品質與安全」專題演講。

09/25
- 新竹捐血中心與國際扶輪社 3500 地區共同辦理「國際扶輪 3500 地區捐贈 4 輛大型捐血車」捐贈暨打造簽約儀式，由新竹捐血中心主任楊炳炘代表簽約。4 輛大型捐血車將於 103 年陸續打造完成。



澎湖扶輪社捐血活動



十月

10/10、11
- 台北捐血中心檢驗課長陳明鴻奉派至江西省參加 PK Club 會議擔任講師，題目為「台灣捐血中心輸血安全發展」。

10/12
- 北投溫泉季主辦單位水美溫泉會館等 9 個單位，聯合捐贈台北捐血中心 16,000 個空血袋。

10/12~15
- 美國血庫協會 (AABB) 2013 年年會於美國科羅拉多州丹佛市舉行。由台南捐血中心主任蔡光昭、新竹捐血中心負責醫師孟繁蕃、高雄捐血中心負責醫師曾士賓及論文獲選者：台北中心技術組技正楊孟樺、高雄中心檢驗課技士林曉琳等參加。

10/13
- 聚合發教育基金會在臺中市新光三越捐血車舉辦「捐血作好事，讓愛傳出去」捐血活動。民眾捐一袋血，該基金會即捐 500 元給臺中市社會局，指定幫助弱勢清寒學生。

10/18
- 臺北市政府衛生局邀請台北捐血中心技術組組長洪英聖，於國泰綜合醫院「102 年病人安全研討會～輸血安全經驗分享」報告「血袋安全相關議題」。

10/19
- 國際獅子會 300E1 區贈送高雄捐血中心「熱血一號」血液運送車乙輛，假高雄大遠百百貨廣場舉行捐贈儀式。

10/19、20
- 本會參加由台灣醫務管理學會主辦之「2013 健康照護聯合學術研討會」，假萬芳醫院舉辦。除展場設置攤位外，也積極推廣並宣導本會各項血品及國血製劑益康產品。

10/28
- 臺北市城中獅子會捐贈台北捐血中心 600 個空血袋。


勤益科技大學師生熱情響應捐血活動

十一月

11/02~16
- 逢甲大學校友會舉辦「2013 年全國校友會同步捐血」活動共 22 場，捐得血液 3,216 單位。

11/04、05
- 大陸蘇州市中心血站訪問團一行 3 人至本會參訪，並至台北捐血中心觀摩各項捐供血作業流程及參觀南海捐血室、228 公園及峨嵋號捐血車。

11/04~08
- 高雄捐血中心主任洪啟民應邀至大陸陝西省血液中心演講，介紹臺灣捐血事業。

11/10
- 新營扶輪社捐贈「新營扶輪號」血液運送車乙輛給台南捐血中心。

11/10~15
- 金財神投注站贈送 200 張大樂透彩券給花蓮捐血中心，並於捐血室辦理捐血週活動，共捐得血液 207 單位。

11/11~12/04
- 102 年捐血服務需求及滿意度調查展開，調查對象為各捐血中心捐全血百次以上，近兩年內未再回捐的合格捐血人。以郵寄問卷方式共寄發問卷 1,078 份；回收有效問卷 262 份，回收率 24.3%。

11/18
- 國際獅子會 300A3 區臺北市遠見獅子會捐贈台北捐血中心 300 個空血袋。

11/26
- 召開第 6 屆第 13 次董事會議，選聘第 7 屆董事與監察人如下：
  董事：羅光瑞、吳伯雄、楊漢湶、戴東原、侯勝茂、葉金川、郝維善、張上淳、王鏡山、林四海、王宗曦、劉麗玲、張峰義等 13 位；監察人為李悌元。

11/27
- 頭前扶輪社社長王連興等共 17 人參訪台北捐血中心，並捐贈空血袋 800 個。

11/29、30
- 亞太血液連線（APBN）第 2 次會議於馬來西亞吉隆坡舉行。由執行長魏昇堂、副執行長楊炳炘、高雄捐血中心主任洪啟民及花蓮捐血中心主任王雲龍代表參加。

11/30
- 高雄捐血中心辦理「102 年高屏澎地區輸血安全研討會」，當日醫療院所與會人數總計 91 人。

十二月

12/01~04
- 2013 年國際輸血學會（ISBT）第 24 屆區域會議於馬來西亞吉隆坡舉辦。本會參加者：執行長魏昇堂、副執行長楊炳炘、高雄捐血中心主任洪啟民、花蓮捐血中心主任王雲龍及論文獲選者：台北捐血中心醫務組長謝輝和、高雄捐血中心技術督導潘玫玲等。

12/11
- 為提升服務品質及面談成效，本會於 10 月 16 日完成本年度 57 個捐血地點「神秘客服務稽核調查」，並於本日辦理調查成果發表會及優良服務人員頒獎。

12/13
- 本會臍帶血庫停止營運後，原庫存 2,056 例臍血幹細胞移轉國立台灣大學生命科學院，做為生物醫學研究使用。
- 台南捐血中心嘉義志工隊隊長林居樹榮獲 102 年度內政部全國志願服務銀質獎。
- 荷蘭 sanquin 血液中心行銷經理 Leo de John 與亞洲醫學檢驗學會理事長張來發先生至花蓮捐血中心參訪與經驗交流。

12/14
- 台灣輸血學會召開年終學術研討會，高雄捐血中心 2 位同仁口頭論文報告：林憲正「B(A) 血型案例分享」、蔡美華「運用核酸擴增技術對於 C 型肝炎病毒檢出率的影響」。

12/18
- 101 年度績優捐血代表晉見總統活動於本日上午在總統府圓滿完成，共有 38 位績優捐血人晉見。

12/20
- 新竹市市長許明財至西大捐血室捐血慶祝就職四周年，新竹捐血中心主任楊炳炘特贈「熱血市長」個人專屬血寶紀念照，感謝市長長期支持捐血。
- 台中市天主教衛道高級中學校友會與台中捐血中心舉辦「校友日返校捐血」活動。活動主題是「挽起袖子，延續石修士熱血之愛」，紀念在台灣捐血史上留下光榮一頁的石伯男修士；石伯男修士於民國 67 年至 83 年期間共捐血 152 次。



中華捐血運動協會理事長李悌元（右三）致贈捐血績優狀

12/21 ● 新竹捐血中心 103 捐血月「傳愛 40 有你真好～捐血愛加倍 馬上馬上拍」活動，假新竹東門城捐血亭舉行，新竹市長許明財亦親臨現場。

12/24 ● 本會召開第 7 屆董事會第 1 次會議，推選新任董事長葉金川、副董事長張上淳。

12/25 ● 本會完成資訊資產風險評鑑報告暨改善建議。

12/27 ● 103 年捐血月活動自 103 年 1 月 1 日至 1 月 31 日正式展開，捐血月主題為「傳愛 40 有你真好」；捐血月記者會於本會會議室舉行。

12/30 ● 花蓮捐血中心假宜蘭喜相逢餐廳辦理新莊國際獅子會捐贈血袋儀式，共捐贈 6,450 個空血袋。

12/31 ● 本會與世信公司重新簽訂「血液製劑委託製造合約書」，合約自簽約日起生效至 107 年 6 月 30 日止。

● 台南捐血中心捐血月記者會假台南市政府新營民治中心大廳舉行。市長賴清德、副市長顏純左、許和鈞、秘書長陳美伶及衛生局長林聖哲現場挽袖捐血，共同呼籲寒冬捐熱血。


朝陽科技大學傳播藝術系同學耶誕節響應捐血活動



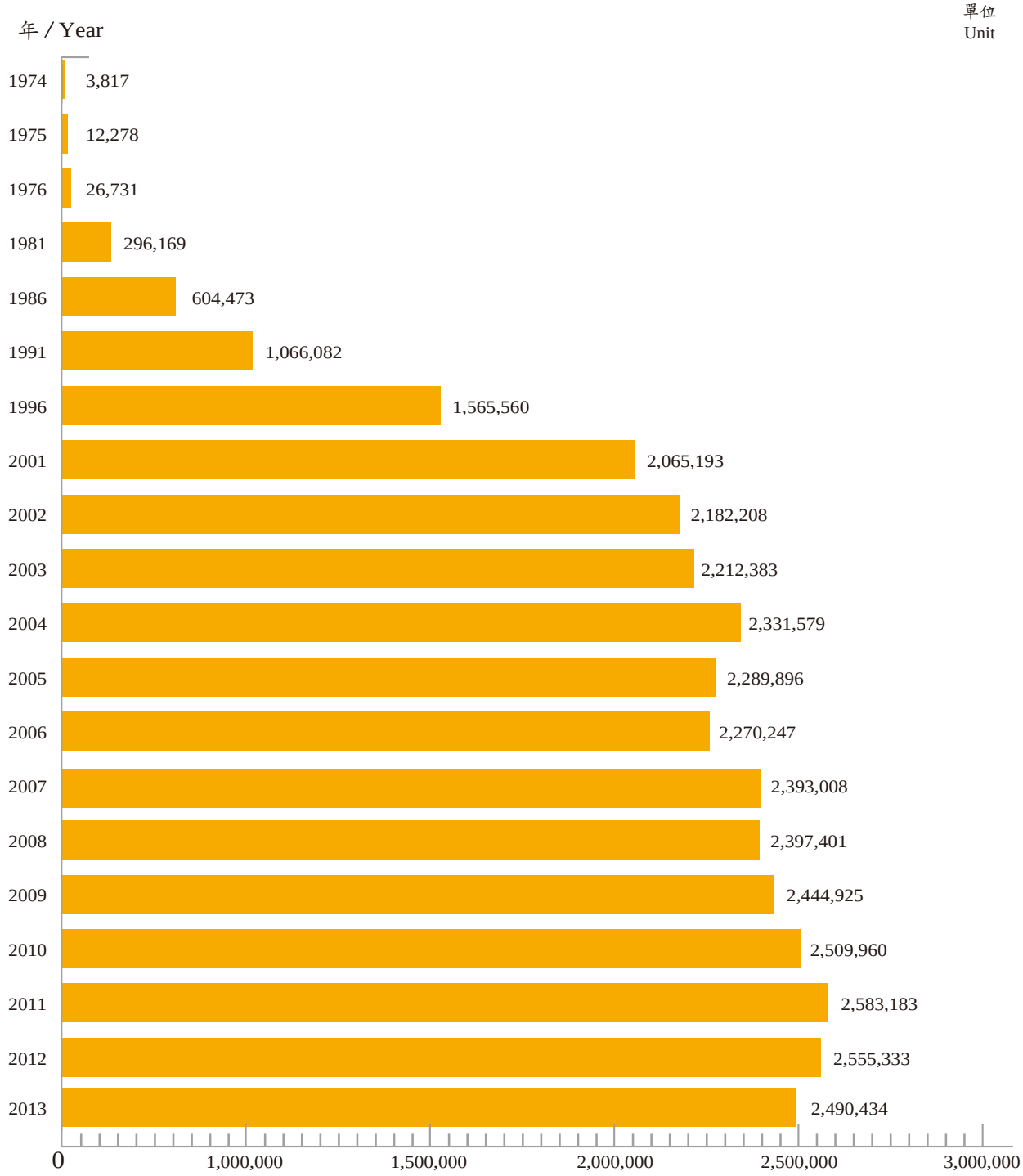
統計表

Operation Statistics



歷年捐血量趨勢圖

Annual Blood Collections, 1974-2013



註:
1.捐血數量為全血及分離術捐血之合計。
2.全血250ml計為1單位，500ml計為2單位。
3.分離術血小板每成人劑量為1單位，2倍成人劑量為2單位。

Note :
1. Total Blood Collection Units: calculated by both whole blood and apheresis collections.
2. 250ml per unit for whole blood and 500ml counts for 2 units.
3. Single adult dose per unit for apheresis platelet and double dose counts for 2 units.



各捐血中心捐血量

Annual Blood Collections by Blood Centers, 1974-2013

單位
Unit

中心別 blood Centers / 年度 Year	台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
1974	3,817						3,817
1975	11,734		544				12,278
1976	22,976		3,539		216		26,731
1981	141,944		58,861	22,535	72,829		296,169
1986	244,830		157,679	75,742	126,222		604,473
1991	421,109		252,561	156,192	205,905	30,315	1,066,082
1996	459,619	220,519	303,393	209,790	295,052	77,187	1,565,560
2001	579,618	294,690	425,953	285,551	381,998	97,383	2,065,193
2002	624,408	307,553	439,269	301,756	406,502	102,720	2,182,208
2003	618,458	313,214	462,180	305,455	411,132	101,944	2,212,383
2004	642,945	333,898	489,079	321,441	437,362	106,854	2,331,579
2005	650,850	320,732	463,553	322,630	429,914	102,217	2,289,896
2006	659,268	322,197	453,015	326,286	403,243	106,238	2,270,247
2007	694,060	338,614	488,984	348,662	413,210	109,478	2,393,008
2008	684,968	342,069	491,754	358,126	413,348	107,136	2,397,401
2009	718,841	326,619	487,230	382,251	420,616	109,368	2,444,925
2010	738,274	343,531	500,298	389,938	423,333	114,586	2,509,960
2011	753,611	347,807	507,104	405,553	453,274	115,834	2,583,183
2012	752,304	343,225	504,362	405,409	434,767	115,266	2,555,333
2013	737,642	336,853	487,170	401,442	414,876	112,451	2,490,434

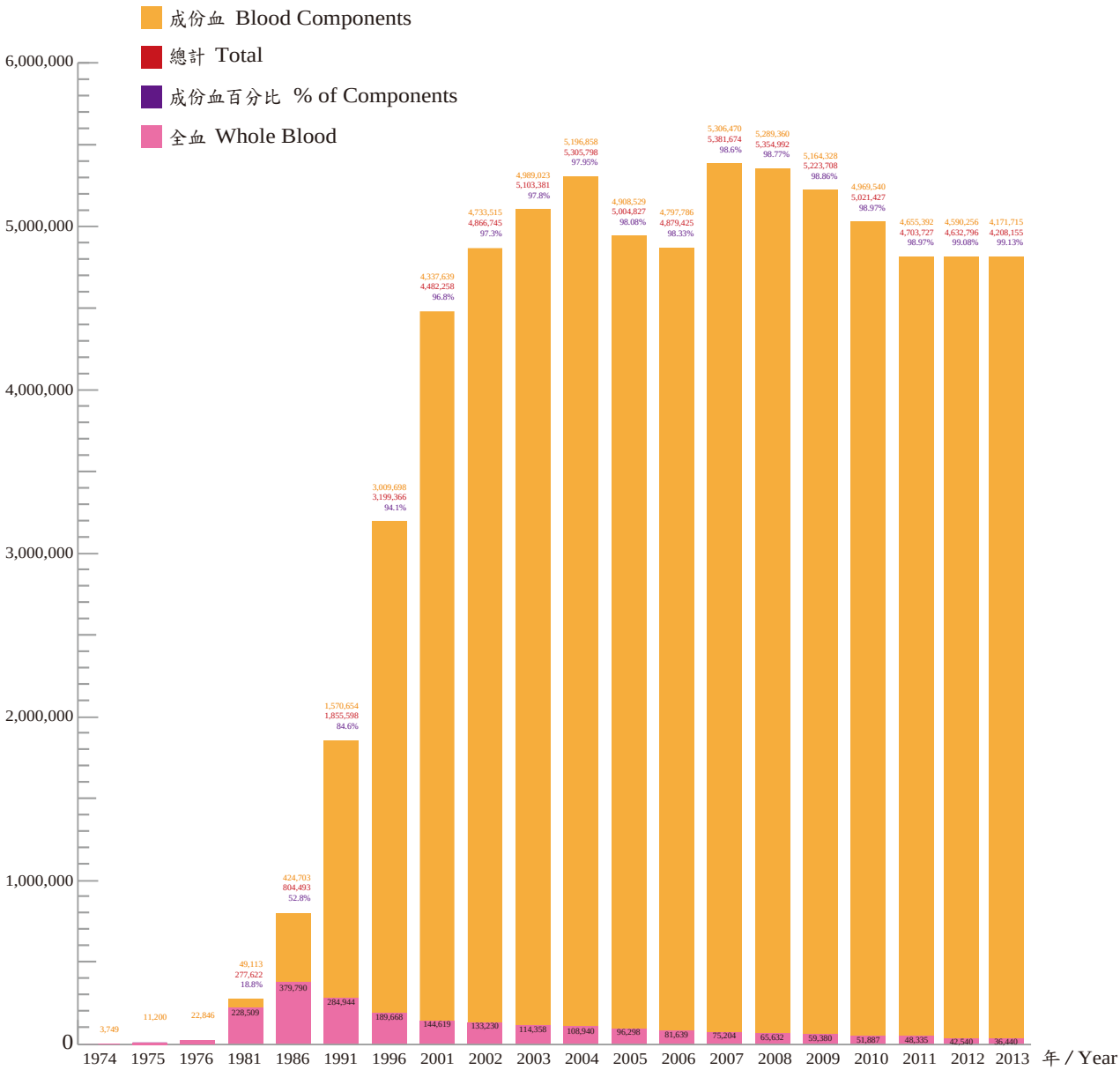
註:
1.捐血數量為全血及分離術捐血之合計。
2.全血250ml計為1單位，500ml計為2單位。
3.分離術血小板每成人劑量為1單位，2倍成人劑量為2單位。

Note :
1. Total Blood Collection Units: calculated by both whole blood and apheresis collections.
2. 250ml per unit for whole blood and 500ml counts for 2 units.
3. Single adult dose per unit for apheresis platelet and double dose counts for 2 units.

歷年供血量趨勢圖

Annual Blood Supply , 1974-2013

單位
Unit



註：
1.全血250ml計為1單位，500ml計為2單位。
2.成分血供應數量係為不含全血之所有血品供應數量。

Note：
1. 250ml per unit for whole blood and 500ml counts for 2 units.
2. Blood Component Issued: Total number of blood issued except. whole blood.



102年全血及成分血供應量

Blood and Blood Components Issued in 2013

單位
Unit

血品 Blood \ 中心別 Blood Centers		台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
紅血球 RBCs	紅血球濃厚液 Packed RBCs	589,477	285,986	405,323	343,568	352,702	92,829	2,069,885
	洗滌紅血球 Washed RBCs	10,665	2,896	3,726	3,928	4,926	564	26,705
	減除白血球之紅血球濃厚液 Leukocyte-Reduced RBCs	21,685	6,942	27,467	4,156	12,522	3,842	76,614
	冷凍去甘油紅血球 Frozen Thawed Deglycerolized RBCs	3	2	0	0	0	0	5
小計 Subtotal		621,830	295,826	436,516	351,652	370,150	97,235	2,173,209
白血球 WBCs	白血球濃厚液 WBC Concentrate	3,655	310	2	132	0	22	4,121
血小板 Platelets	血小板濃厚液 Platelet Concentrate	87,671	78,092	88,096	43,944	168	3,298	301,269
	分離術血小板 Apheresis Platelets	55,404	19,058	24,248	30,226	28,627	6,406	163,969
	減白分離術血小板 Leukocyte-Reduced Apheresis Platelets	28,531	4,259	10,585	2,963	13,603	1,075	61,016
血漿 Plasma	新鮮冷凍血漿 Fresh Frozen Plasma	270,530	150,984	197,516	192,492	186,542	37,351	1,035,415
	冷凍血漿 Frozen Plasma	45,578	38,873	34,336	42,300	64,659	22,850	248,596
	冷凍沉澱品 Cryoprecipitate	72,102	17,324	35,714	38,468	13,586	6,926	184,120
	原料血漿（回收） Source Plasma	103,680	51,840	75,168	62,208	68,688	0	361,584
總計 Total		1,288,981	656,566	902,181	764,385	746,023	175,163	4,533,299
全血 Whole Blood		12,976	6,305	7,749	5,931	1,991	1,488	36,440
供應總數 Total Units Issued		1,301,957	662,871	909,930	770,316	748,014	176,651	4,569,739
血液成分占供應總數百分比 Rate of Components		99.00%	99.05%	99.15%	99.23%	99.73%	99.16%	99.20%

註：1.全血250ml為1單位，500ml為2單位。
2.成分血供應數量係扣除全血數量後之所有血品數量。

Note :1. 250ml per unit for whole blood and 500ml counts for 2 units.
2. Blood Component Issued: Total number of blood issued except.whole blood issued.

102年各捐血中心每月捐血量

Monthly Blood Collection by Blood Centers in 2013

單位
Unit

中心別 Blood Centers / 月份 Month	台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
一月 Jan.	73,878	31,710	49,006	36,266	37,467	10,970	239,297
二月 Feb.	53,010	24,384	37,442	29,698	31,496	6,591	182,621
三月 Mar.	66,025	30,156	40,705	39,321	40,496	11,340	228,043
四月 Apr.	57,660	26,162	35,117	30,488	33,608	8,937	191,972
五月 May.	62,956	27,697	45,319	31,685	35,310	9,016	211,983
六月 Jun.	65,014	29,257	41,961	38,118	32,688	10,424	217,462
七月 Jul.	59,699	28,192	35,676	27,541	33,216	8,691	193,015
八月 Aug.	57,424	26,956	43,016	35,620	32,185	9,425	204,626
九月 Sept.	57,095	27,525	39,269	30,166	33,081	8,956	196,092
十月 Oct.	63,244	28,493	41,534	35,408	37,069	9,355	215,103
十一月 Nov.	59,777	28,224	39,100	32,410	32,558	9,693	201,762
十二月 Dec.	61,860	28,097	39,025	34,721	35,702	9,053	208,458
總計 Total	737,642	336,853	487,170	401,442	414,876	112,451	2,490,434

註：
1.捐血量為全血及分離術捐血之合計。
2.全血250ml為1單位，500ml為2單位。
3.分離術血小板每成人劑量為1單位，2倍劑量為2單位。

Note：
1. Total Blood Collection Units: calculated by both whole blood and apheresis collections.
2. 250ml per unit for whole blood and 500ml counts for 2 units.
3. Single adult dose per unit for apheresis platelet and double dose counts for 2 units.



近五年每千人口國民全血捐血量

Whole Blood Collection per 1000 head of Population, 2009-2013

單位：公升／每千人口
Unit：Liter／1,000 population

年份 Year	項目 Item ＼ 中心別 Blood Centers	台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
2009	捐血量(毫升) Blood Collection	162,627,000	78,084,250	118,486,250	90,978,750	96,972,000	25,955,250	573,103,500
	轄區人口數 Population	6,953,984	3,442,631	4,472,795	3,418,467	3,747,033	1,034,435	23,069,345
	每千國民平均捐血量（公升） Liter/1,000 population	23.39	22.68	26.49	26.61	25.88	25.09	24.84
2010	捐血量(毫升) Blood Collection	166,137,750	81,743,500	120,516,750	90,927,000	96,024,500	27,055,000	582,404,500
	轄區人口數 Population	6,974,554	3,499,663	4,477,114	3,409,906	3,745,132	1,032,012	23,138,381
	每千國民平均捐血量（公升） Liter/1,000 population	23.82	23.36	26.92	26.67	25.64	26.22	25.17
2011	捐血量(毫升) Blood Collection	168,680,250	81,784,750	120,912,500	93,291,000	102,674,250	27,168,250	594,511,000
	轄區人口數 Population	7,054,442	3,498,987	4,484,098	3,400,813	3,737,885	1,026,326	23,202,551
	每千國民平均捐血量（公升） Liter/1,000 population	23.91	23.37	26.96	27.43	27.47	26.47	25.62
2012	捐血量(毫升) Blood Collection	167,282,750	80,345,250	118,749,000	92,669,250	98,440,500	25,880,000	583,366,750
	轄區人口數 Population	7,086,152	3,525,575	4,496,195	3,397,242	3,734,579	1,021,830	23,261,573
	每千國民平均捐血量（公升） Liter/1,000 population	23.61	22.79	26.41	27.28	26.36	25.33	25.08
2013	捐血量(毫升) Blood Collection	163,346,750	78,322,500	113,189,750	91,758,750	93,636,750	25,358,500	565,613,000
	轄區人口數 Population	7,131,766	3,555,325	4,510,598	3,394,334	3,733,713	1,018,477	23,344,213
	每千國民平均捐血量（公升） Liter/1,000 population	22.90	22.03	25.09	27.03	25.08	24.90	24.23

註：
1.人口數依內政部戶政司統計以每年6月30日實有數為準。
2.全血每單位以250ml計算。

Note：
1. Mid-year population, data from the Ministry of Interior.
2. 250ml per unit for whole blood.

近五年捐血人次及國民捐血率

Blood Donation and Donor Participation Rate by Blood Centers, 2009-2013

單位：人次
Unit : Donation

年份 Year	中心別 Blood Centers / 項目 Item	台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
2009	捐血人次 Blood Donation	533,399	243,416	365,843	290,406	313,686	82,434	1,829,184
	轄區人口數 Population	6,953,984	3,442,631	4,472,795	3,418,467	3,747,033	1,034,435	23,069,345
	國民捐血率 Donor Participation	7.67%	7.07%	8.18%	8.50%	8.37%	7.97%	7.93%
2010	捐血人次 Blood Donation	531,254	255,439	372,360	291,710	313,490	84,989	1,849,242
	轄區人口數 Population	6,974,554	3,499,663	4,477,114	3,409,906	3,745,132	1,032,012	23,138,381
	國民捐血率 Donor Participation	7.62%	7.30%	8.32%	8.55%	8.37%	8.24%	7.99%
2011	捐血人次 Blood Donation	534,349	254,731	377,883	303,895	329,804	85,445	1,886,107
	轄區人口數 Population	7,054,442	3,498,987	4,484,098	3,400,813	3,737,885	1,026,326	23,202,551
	國民捐血率 Donor Participation	7.57%	7.28%	8.43%	8.94%	8.82%	8.33%	8.13%
2012	捐血人次 Blood Donation	526,216	248,420	371,259	304,184	300,906	83,536	1,834,521
	轄區人口數 Population	7,086,152	3,525,575	4,496,195	3,397,242	3,734,579	1,021,830	23,261,573
	國民捐血率 Donor Participation	7.43%	7.05%	8.26%	8.95%	8.06%	8.18%	7.89%
2013	捐血人次 Blood Donation	513,907	241,765	351,790	294,771	278,740	79,992	1,760,965
	轄區人口數 Population	7,131,766	3,555,325	4,510,598	3,394,334	3,733,713	1,018,477	23,344,213
	國民捐血率 Donor Participation	7.21%	6.80%	7.80%	8.68%	7.47%	7.85%	7.54%

註：1.人口數依內政部戶政司統計以每年6月30日實有數為準。
2.全血捐血方式及分離術捐血方式均列入計算。

Note : 1.Mid-year population, the Ministry of Interior.
2.Both whole blood and apheresis donations are included.

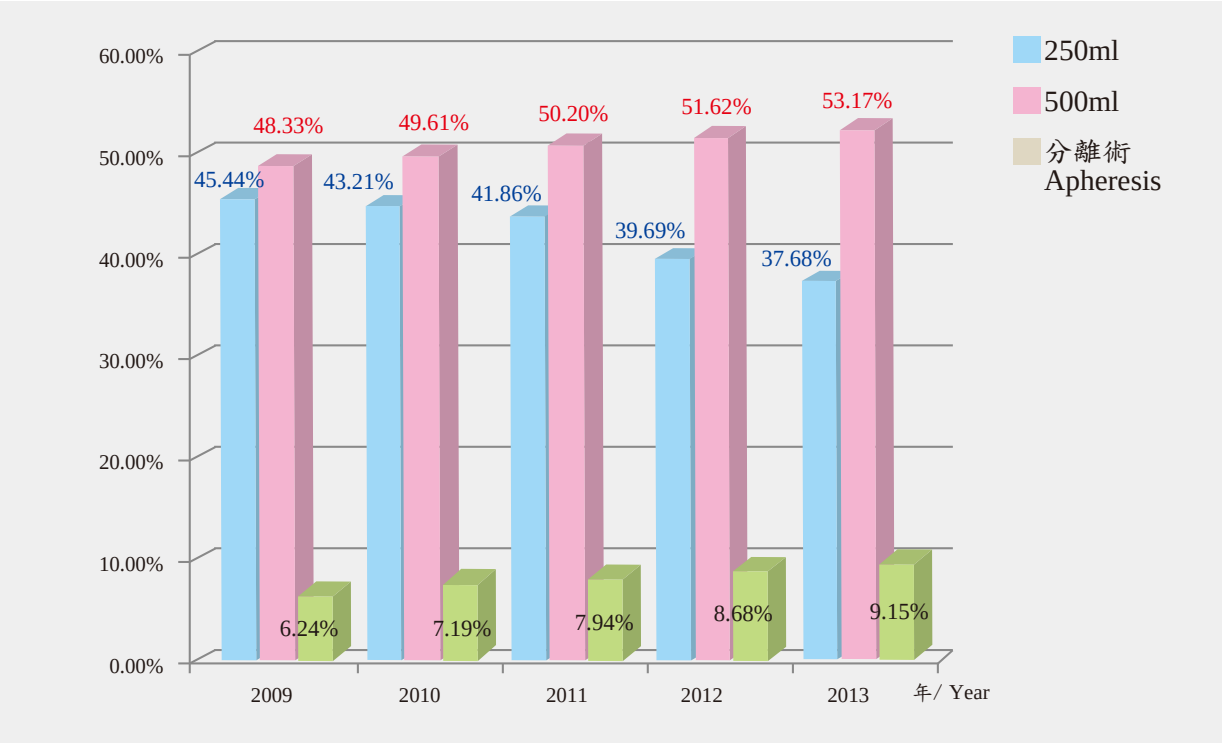


近五年捐血類型比較

Whole Blood Compared with Apheresis Collections, 2009-2013

單位
Unit

類型 Type / 年度 Year	全血 Whole blood				分離術捐血 Apheresis		總計 Total
	250ml	百分比 Rate	500ml	百分比 Rate	分離術 Apheresis	百分比 Rate	
2009	1,110,894	45.44%	1,181,520	48.33%	152,511	6.24%	2,444,925
2010	1,084,464	43.21%	1,245,154	49.61%	180,342	7.19%	2,509,960
2011	1,081,290	41.86%	1,296,754	50.20%	205,139	7.94%	2,583,183
2012	1,014,319	39.69%	1,319,148	51.62%	221,866	8.68%	2,555,333
2013	938,312	37.68%	1,324,140	53.17%	227,982	9.15%	2,490,434



註：每單位以250ml計算。
Note：250ml per unit.

近五年500毫升捐血佔全血人次百分比

Whole Blood Donation Rate by 500ml, 2009-2013

單位：人次
Unit:Donation

年份 Year	中心別 Blood Centers / 項目 Iten	台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
2009	500毫升捐血人次 500ml Blood Donation	170,367	82,873	119,302	89,743	101,996	26,479	590,760
	全血捐血人次 Whole Blood Donation	480,141	229,464	354,643	274,172	285,892	77,342	1,701,654
	占全血捐血人次百分比 %of 500ml Whole Blood Donations	35.48%	36.12%	33.64%	32.73%	35.68%	34.24%	34.72%
2010	500毫升捐血人次 500ml Blood Donation	188,595	86,982	124,331	92,238	102,509	27,922	622,577
	全血捐血人次 Whole Blood Donation	475,956	239,992	357,736	271,470	281,589	80,298	1,707,041
	占全血捐血人次百分比 %of 500ml Whole Blood Donations	39.62%	36.24%	34.75%	33.98%	36.40%	34.77%	36.47%
2011	500毫升捐血人次 500ml Blood Donation	197,849	90,362	124,561	94,016	112,939	28,650	648,377
	全血捐血人次 Whole Blood Donation	476,872	236,777	359,089	279,148	297,758	80,023	1,729,667
	占全血捐血人次百分比 %of 500ml Whole Blood Donations	41.49%	38.16%	34.69%	33.68%	37.93%	35.80%	37.49%
2012	500毫升捐血人次 500ml Blood Donation	203,374	91,627	125,776	93,284	116,992	28,521	659,574
	全血捐血人次 Whole Blood Donation	465,757	229,754	349,220	277,393	276,770	74,999	1,673,893
	占全血捐血人次百分比 %of 500ml Whole Blood Donations	43.67%	39.88%	36.02%	33.63%	42.27%	38.03%	39.40%
2013	500毫升捐血人次 500ml Blood Donation	200,638	91,306	125,092	98,812	117,175	29,047	662,070
	全血捐血人次 Whole Blood Donation	452,749	221,984	327,667	268,223	257,372	72,387	1,600,382
	占全血捐血人次百分比 %of 500ml Whole Blood Donations	44.32%	41.13%	38.18%	36.84%	45.53%	40.13%	41.37%



102年首次捐血人數及所占比率

New Donors Number and Rate in 2013

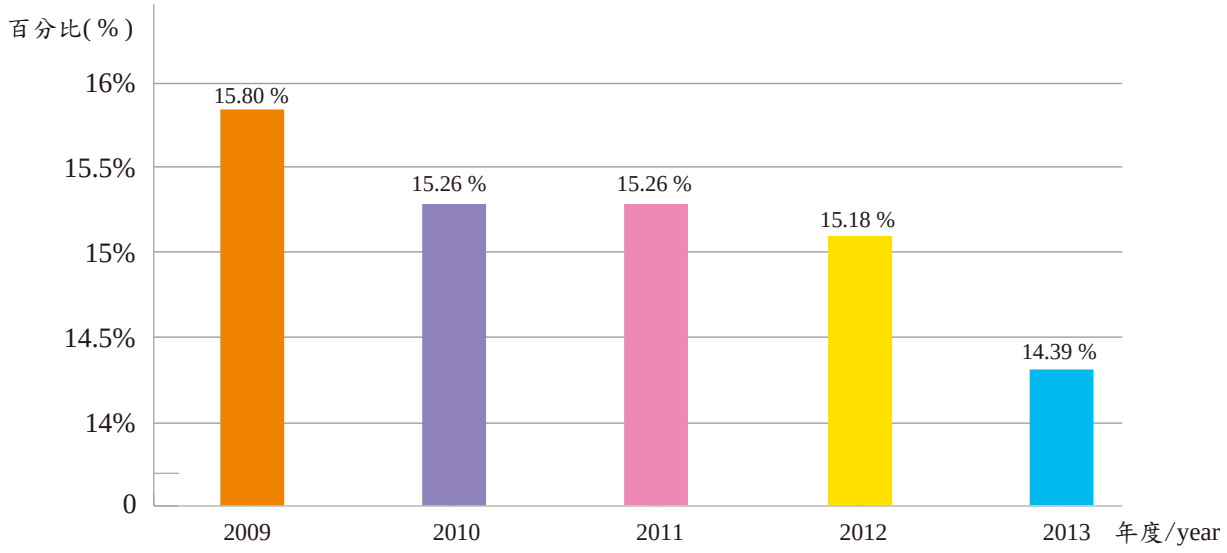
單位：人數
Unit : Donors

中心別 Blood Centers / 項目 Iten	台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
首次捐血人數 New Donors	36,656	20,812	29,120	30,931	23,115	8,188	148,822
捐血總人數 Total Donors	290,046	144,488	214,275	177,063	160,591	47,525	1,033,988
首次捐血率 New Donors Rate	12.64%	14.40%	13.59%	17.47%	14.39%	17.23%	14.39%

註：捐血總人數係指當年內捐血人數總和同一人捐血數次，皆以1人計。
Note：Total donors refer to the sum of individuals donating blood one or more times in the year.

近五年首次捐血趨勢變化

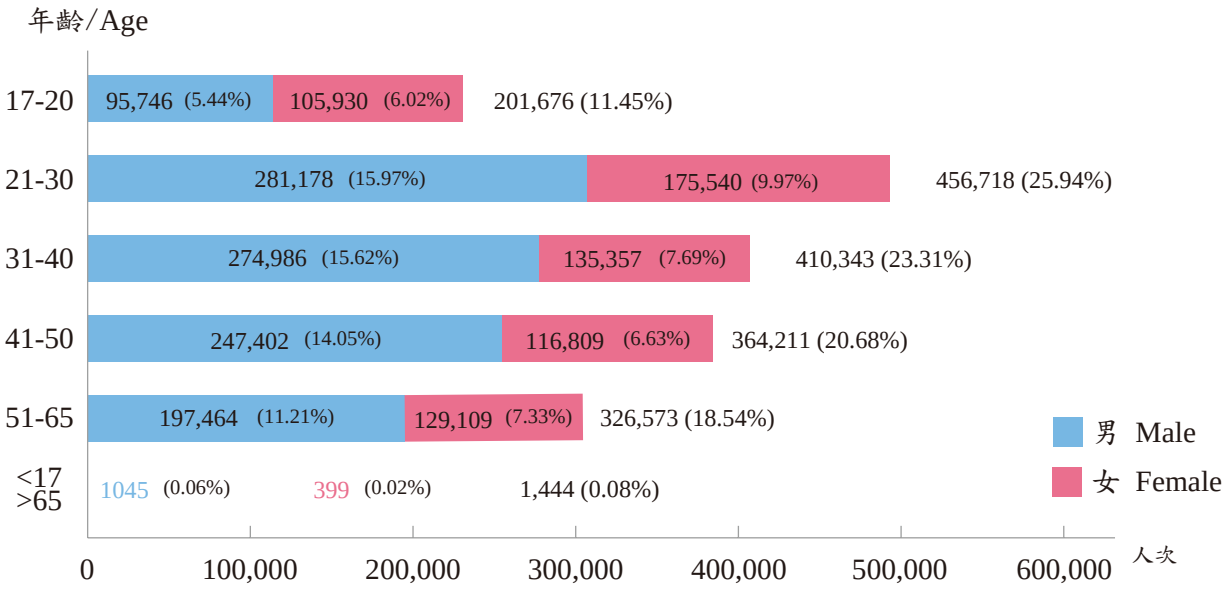
Variation of New Donors Rate, 2009~2013



102年捐血年齡/性別人次及所占比率

Distribution of Donations by Sex and Age in 2013

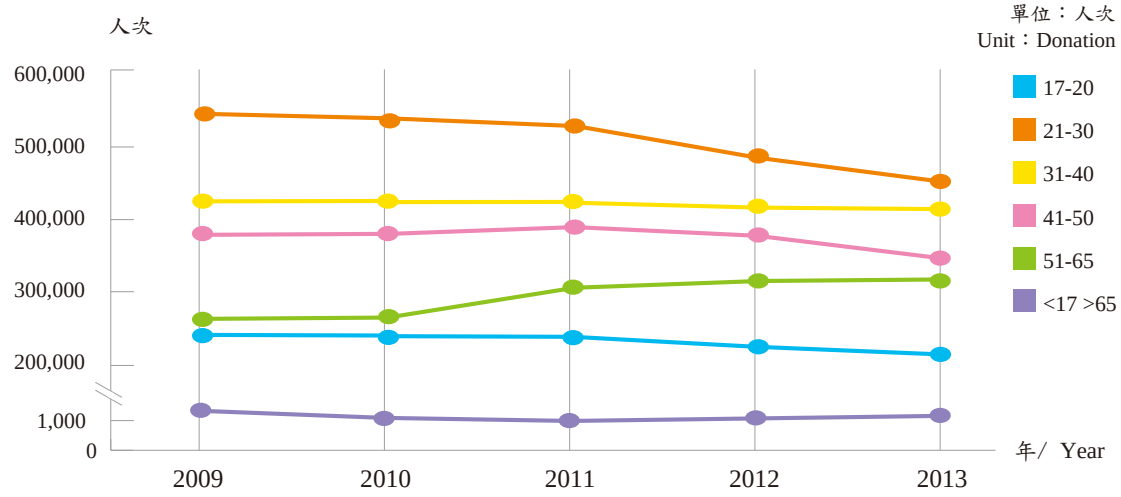
總計 Total：1,760,965 人次 （Donations）
男性 Male：1,097,821 （62.34%）
女性 Female：663,144 （37.66%）



註：全血捐血及分離術捐血均列入計算。
Note：Both whole blood and apheresis donations are included.

近五年捐血人年齡趨勢

Distribution of Donations by Age, 2009-2013



註：全血捐血及分離術捐血均列入計算。
Note：Both whole blood and apheresis donations are included.



102年各年齡層/性別捐血次數

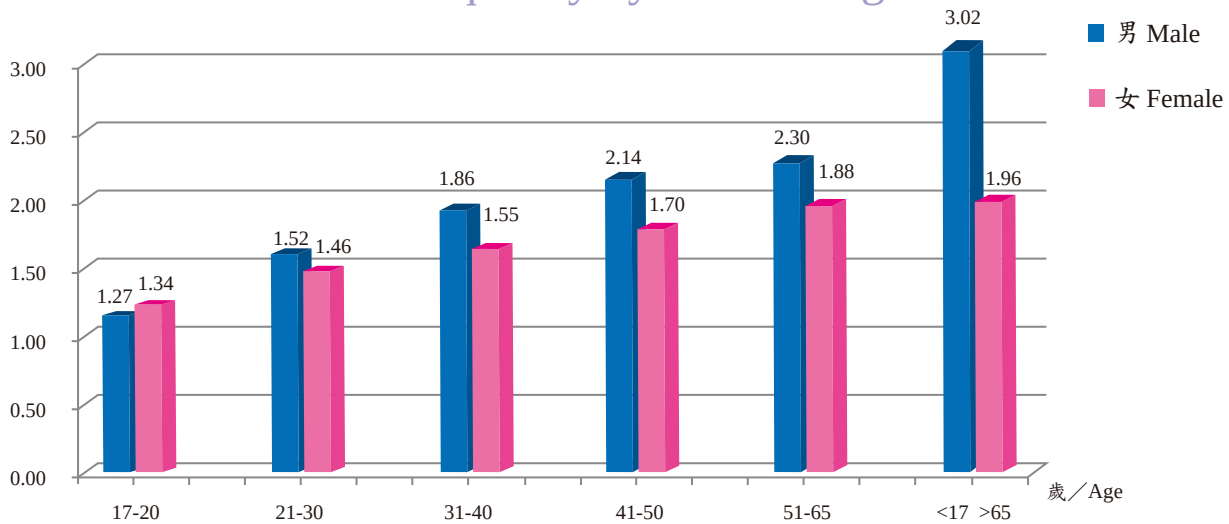
Donation Frequency by Sex and Age in 2013

單位：捐血次數／年
Unit：Donation／year

年齡 Age	中心別 Blood Centers / 性別 Sex	台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	平均捐血次數	
17-20	男 Male	1.27	1.22	1.27	1.28	1.30	1.30	1.27	1.31
	女 Female	1.33	1.26	1.32	1.36	1.40	1.35	1.34	
21-30	男 Male	1.56	1.49	1.48	1.50	1.58	1.52	1.52	1.50
	女 Female	1.46	1.39	1.45	1.46	1.52	1.49	1.46	
31-40	男 Male	1.87	1.75	1.81	1.91	1.94	1.86	1.86	1.74
	女 Female	1.55	1.51	1.53	1.53	1.65	1.58	1.55	
41-50	男 Male	2.23	2.08	1.98	2.19	2.17	2.18	2.14	1.98
	女 Female	1.72	1.70	1.66	1.65	1.79	1.72	1.70	
51-65	男 Male	2.52	2.26	2.07	2.31	2.22	2.28	2.30	2.11
	女 Female	1.94	1.90	1.78	1.79	1.94	1.91	1.88	
<17 >65	男 Male	3.70	2.74	3.76	1.79	4.11	2.19	3.02	2.63
	女 Female	2.20	2.11	2.50	1.31	2.50	1.67	1.96	
小計	男 Male	1.91	1.77	1.72	1.75	1.81	1.76	1.80	1.70
	女 Female	1.59	1.53	1.54	1.51	1.62	1.58	1.56	
總計		1.77	1.67	1.64	1.66	1.74	1.68	1.70	

102年捐血人性別/年齡層/平均捐血次數趨勢圖

Donation Frequency by Sex and Age in 2013

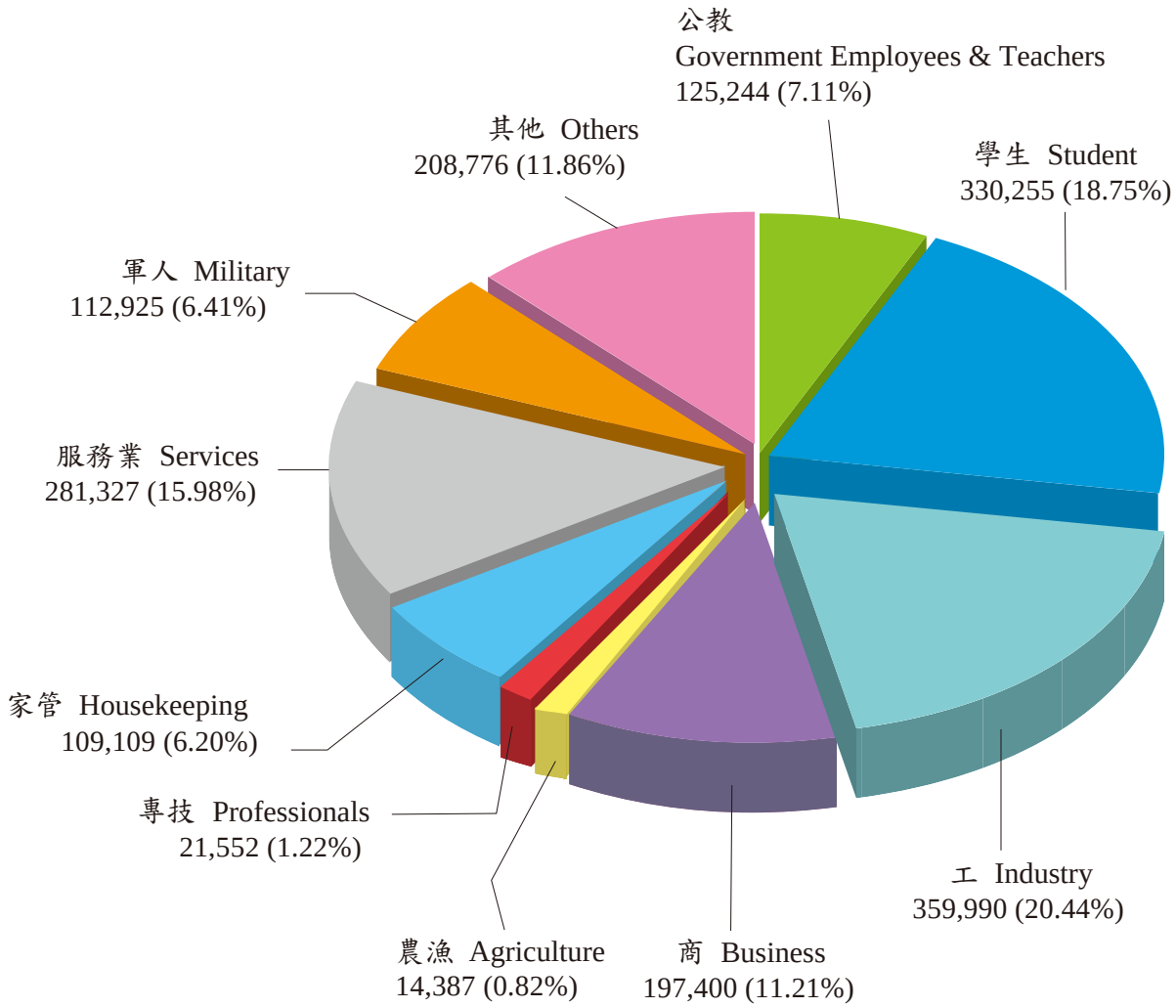


102年捐血人職業統計

Occupational Distribution of Donations in 2013

總計：1,760,965 人次
Total：1,760,965 Donation

單位：人次
Unit：Donation

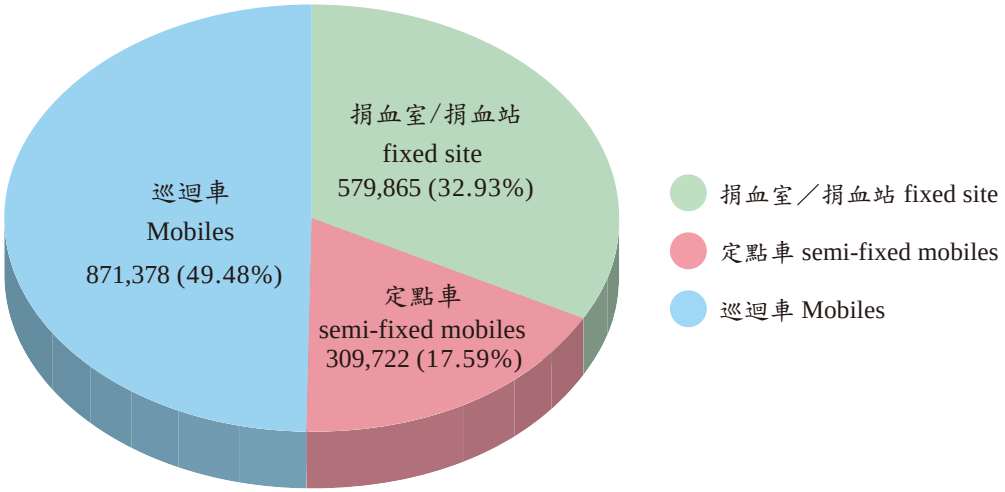


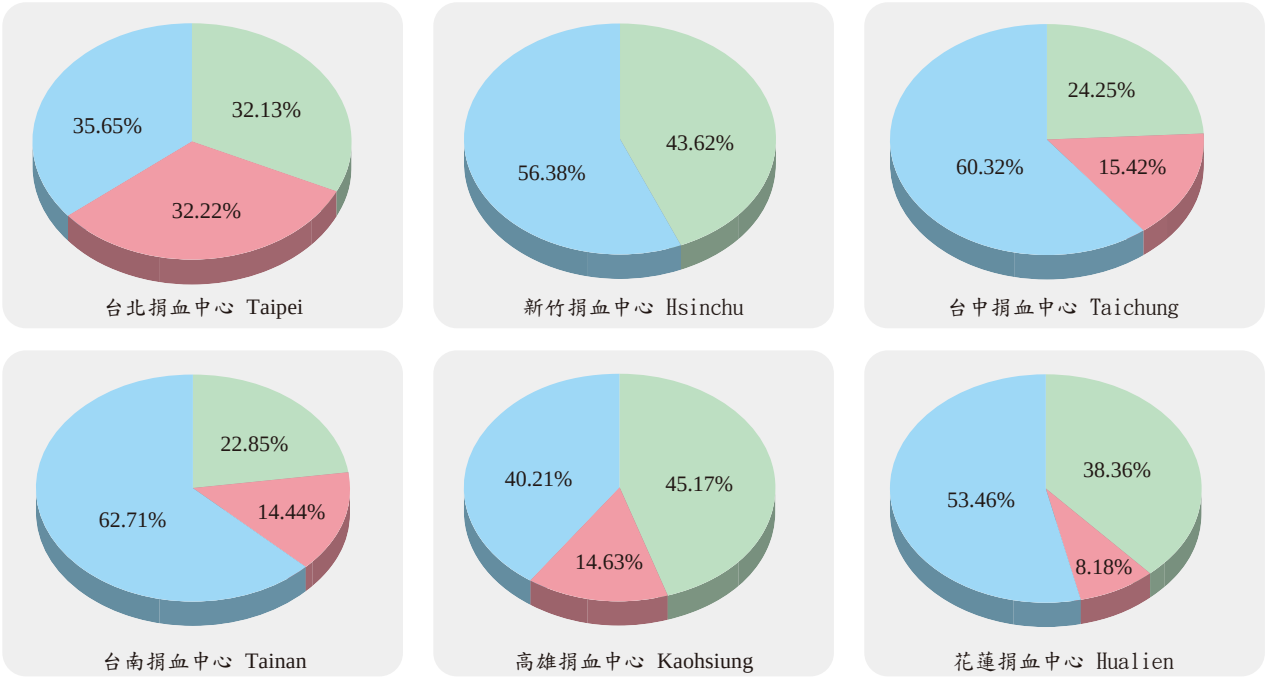


102年不同類型捐血地點捐血人比率

Blood Donation Rate by Sites in 2013

單位：人次
Unit：Donation





102年捐血前體檢不合格統計

Pre-Donation Donor Deferral in 2013

單位：人次
Unit：Donation

中心別 Blood Centers / 不合格原因 Reasons of Deferral		台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
1	血紅素不足 Low Hemoglobin	32,233	12,512	16,824	21,715	18,390	4,889	106,563
2	血壓過高、過低 Blood Pressure too High or too Low	13,580	2,659	6,539	3,762	4,726	825	32,091
3	服用阿斯匹靈或其他藥物 Aspirin or other medications	9,841	3,910	4,434	4,046	4,153	1,498	27,882
4	D 檔、W 檔、R 檔、Q 檔 Temporary Deferral	7,991	1,115	7,630	2,023	5,032	375	24,166
5	捐血間隔未滿 Interval of Donations	5,290	173	6,326	154	4,462	28	16,433
6	睡眠不足 Lack of Sleeping	3,505	1,332	3,037	2,508	1,627	373	12,382
7	身體不適，正在醫療中 Under Medical Treatment	4,321	193	3,236	1,132	867	403	10,152
8	危險性行為者 High-Risk Sexual Behaviors	3,324	251	2,791	527	457	68	7,418
9	曾接受過輸血或外科手術 Recipient of Blood or Surgery	2,227	1,002	1,361	1,479	1,016	313	7,398
10	體重不足 Low Body Weigh	2,311	515	1,228	671	1,011	279	6,015
11	其他 Other Abnormalities	19,864	6,409	12,130	8,030	10,050	2,191	58,674
不合格人次數 Deferred Donations		104,487	30,071	65,536	46,047	51,791	11,242	309,174
志願捐血總人次數 Total Donations		618,394	271,836	417,326	340,818	330,531	91,234	2,070,139
占志願捐血總人數百分比 % of Deferred Donations		16.90%	11.06%	15.70%	13.51%	15.67%	12.32%	14.93%

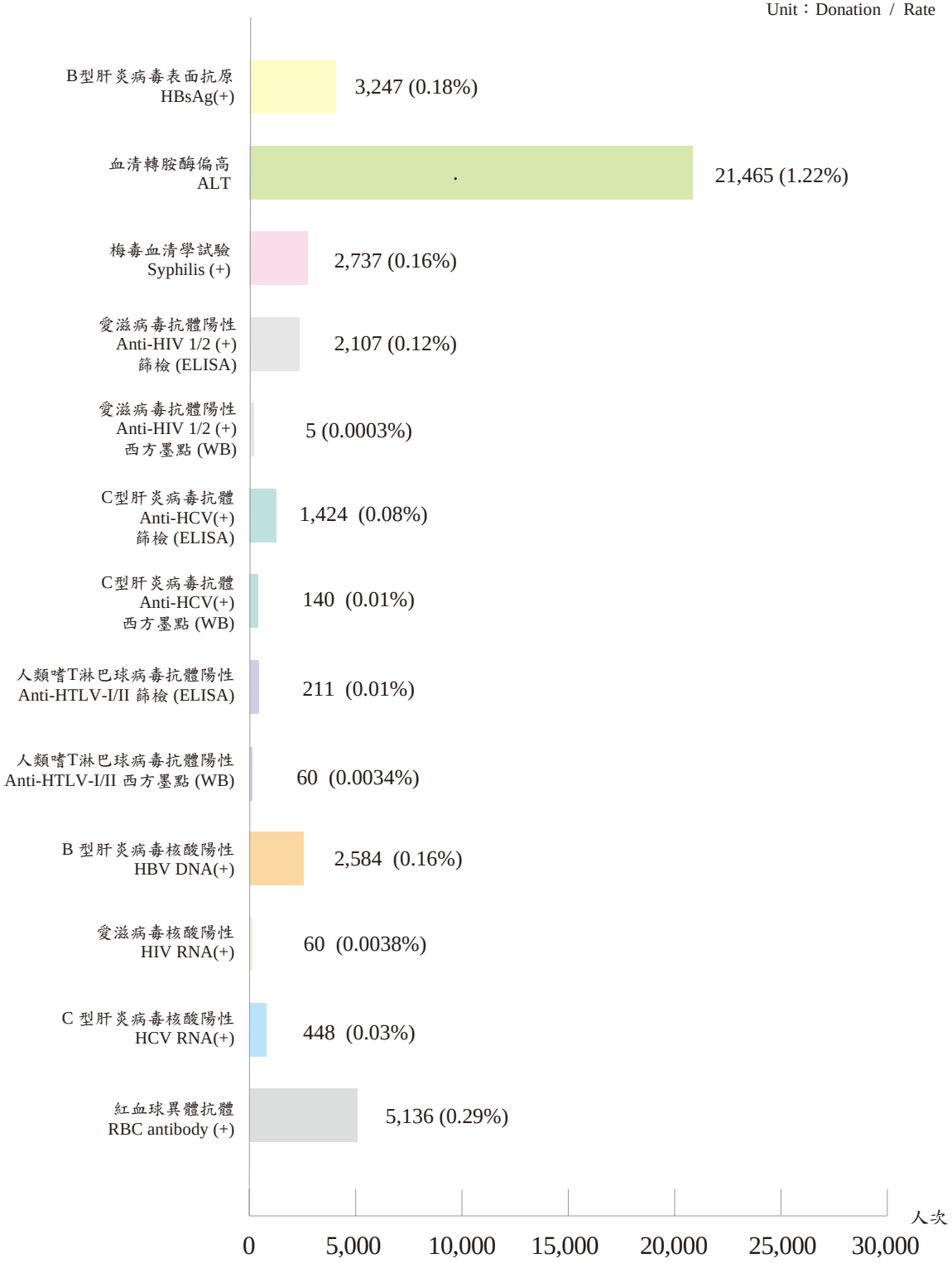
註：志願捐血總人次數：係包括捐血前不合格人次及實際捐血人次數。
Note:Total Attended Donations: Total number of donors who attended to donate but were deferred and those who succeed to donate.



102年血液檢驗不合格統計

Blood Screening in 2013

單位：人次/百分比
Unit：Donation / Rate



註：本會自102年2月起全面實施病毒核酸檢驗，故病毒核酸陽性百分比乃以2-12月之病毒核酸檢驗陽性人次除以2-12月總捐血人次。

102年血液檢驗

Blood Screening in Laboratory in 2013

單位：人次／百分比
Unit：Donation／Rate

項目Item ＼ 中心別 Blood Centers		台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總　計 Total
捐血數（人次）Donations		513,907	241,765	351,790	294,771	278,740	79,992	1,760,965
檢驗不合格數 Unqualifed Tested		8,125	4,665	6,335	5,925	4,975	1,560	31,585
百分比 Rate（%）		1.58%	1.93%	1.80%	2.01%	1.78%	1.95%	1.79%
B 型肝炎病毒表面抗原 HBsAg（+）		902	508	645	577	468	147	3,247
百分比 Rate（%）		0.18%	0.21%	0.18%	0.20%	0.17%	0.18%	0.18%
血清轉胺酶偏高 ALT		5,411	3,227	4,245	4,093	3,396	1,093	21,465
百分比 Rate（%）		1.05%	1.33%	1.21%	1.39%	1.22%	1.37%	1.22%
梅毒血清學試驗 Syphilis(+)		643	343	632	489	520	110	2,737
百分比 Rate（%）		0.13%	0.14%	0.18%	0.17%	0.19%	0.14%	0.16%
愛滋病毒抗體陽性 Anti-HIV1/2（+）	篩檢（ELISA）	591	292	437	390	302	95	2,107
	百分比 Rate（%）	0.12%	0.12%	0.12%	0.13%	0.11%	0.12%	0.12%
	西方墨點(WB)	2	1	2	0	0	0	5
	百分比 Rate（%）	0.0004%	0.0004%	0.0006%	0.0000%	0.0000%	0.0000%	0.0003%
C 型肝炎病毒抗體 Anti-HCV（+）	篩檢（ELISA）	360	213	269	304	201	77	1,424
	百分比 Rate（%）	0.07%	0.09%	0.08%	0.10%	0.07%	0.10%	0.08%
	西方墨點(WB)	33	27	25	30	18	7	140
	百分比 Rate（%）	0.01%	0.01%	0.01%	0.01%	0.01%	0.01%	0.01%
人類嗜 T 淋巴球病毒抗體陽性 Anti-HTLV-I/II	篩檢（ELISA）	60	32	40	40	22	17	211
	百分比 Rate（%）	0.01%	0.01%	0.01%	0.01%	0.01%	0.02%	0.01%
	西方墨點(WB)	21	11	12	3	6	7	60
	百分比 Rate（%）	0.0041%	0.0045%	0.0034%	0.0010%	0.0022%	0.0088%	0.0034%
B 型肝炎病毒核酸陽性 HBV DNA(+)		684	381	562	480	378	99	2,584
百分比 Rate（%）		0.15%	0.17%	0.18%	0.18%	0.15%	0.14%	0.16%
愛滋病毒核酸陽性 HIV RNA(+)		11	11	12	12	11	3	60
百分比 Rate（%）		0.0024%	0.0050%	0.0038%	0.0045%	0.0043%	0.0042%	0.0038%
C 型肝炎病毒核酸陽性 HCV RNA(+)		82	61	94	114	84	16	448
百分比 Rate（%）		0.02%	0.03%	0.03%	0.04%	0.03%	0.02%	0.03%
紅血球異體抗體 RBC antibody（+）		1,923	897	779	546	620	371	5,136
百分比 Rate（%）		0.37%	0.37%	0.22%	0.19%	0.22%	0.46%	0.29%

註：本會自102年2月起全面實施病毒核酸檢驗，故病毒核酸陽性百分比乃以2-12月之病毒核酸檢驗陽性人次除以2-12月總捐血人次
Note: NAT(HIV,HBV,HCV) testing was implemented since Feb.2013.



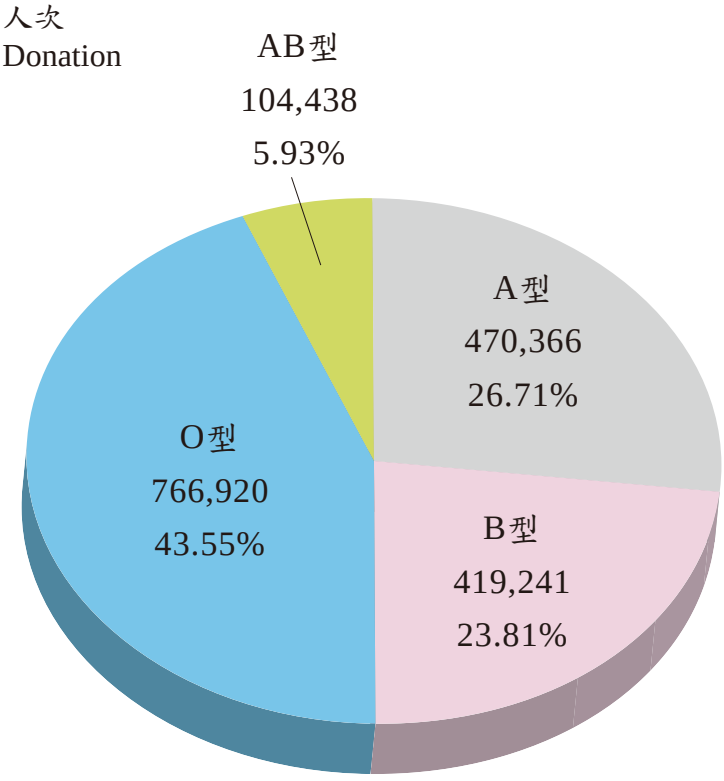
102年捐血血型分布

ABO Blood Grouping in 2013

單位：人次
Unit：Donation

中心別 Blood Centers / 血型 Blood Type	台北捐血中心 Taipei	新竹捐血中心 Hsinchu	台中捐血中心 Taichung	台南捐血中心 Tainan	高雄捐血中心 Kaohsiung	花蓮捐血中心 Hualien	總計 Total
A	137,276	64,949	94,490	78,212	73,964	21,475	470,366
百分比 Rate(%)	26.71%	26.86%	26.86%	26.53%	26.54%	26.85%	26.71%
B	122,297	56,988	82,380	71,234	67,167	19,175	419,241
百分比 Rate(%)	23.80%	23.57%	23.42%	24.17%	24.10%	23.97%	23.81%
O	221,859	106,149	155,723	128,403	120,810	33,976	766,920
百分比 Rate(%)	43.17%	43.91%	44.27%	43.56%	43.34%	42.47%	43.55%
AB	32,475	13,679	19,197	16,922	16,799	5,366	104,438
百分比 Rate(%)	6.32%	5.66%	5.46%	5.74%	6.03%	6.71%	5.93%
總計 Total	513,907	241,765	351,790	294,771	278,740	79,992	1,760,965

總計：1,760,965 人次
Total：1,760,965 Donation



102年ABO亞型

ABO Subtypes in 2013

單位：人次

Unit：Donation

A 亞型（A subtype）		B 亞型（B subtype）		AB 亞型（AB subtype）		亞孟買型（Parabombay）	
A_2	2	B_3	644	A_1B_3	150	O^{AB}_{Hm}	10
A_3	4	B_{el}	47	A_2B	133	O^{A}_{Hm}	62
A_{el}	106			A_3B	3	O^{B}_{Hm}	83
A_m	6			AB_3	70	O_{Hm}	61
A_x	4			AB_{el}	5		
				$A_{el}B$	4		
				$_{cis}AB$	3		



102年本會及各捐血中心人員配賦

Human Resources in 2013

單位：人數
Unit：Person

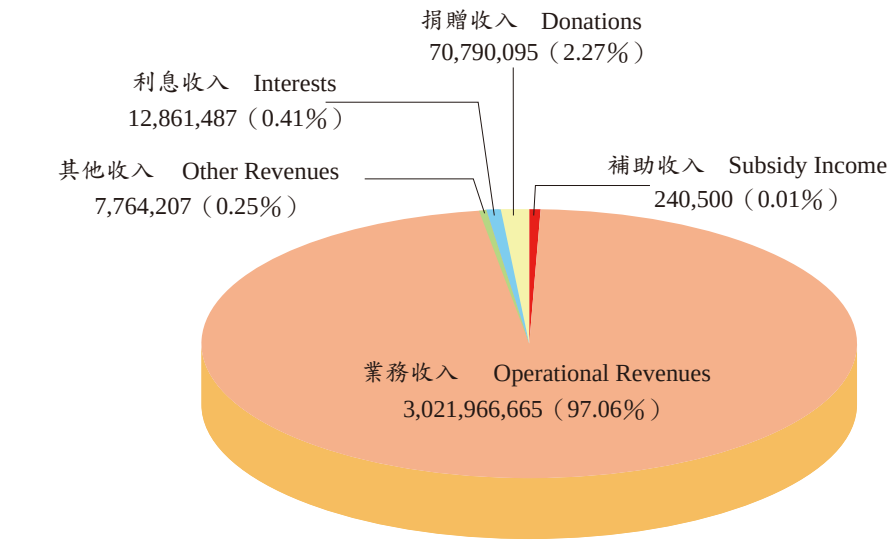
區　　分 Classification	醫　　師 Physician	技術人員 Technical Staff	護理人員 Nursing Staff	行政人員 Administrative Staff	臨　　僱 Temporary	總計 Total	百分比 Rate（%）
基金會本部 Head Office	0	7	0	27	1	35	2.99%
台北捐血中心 Taipei	2	112	129	82	29	354	30.26%
新竹捐血中心 Hsinchu	1	43	44	46	3	137	11.71%
台　中捐血中心 Taichung	1	45	79	59	18	202	17.27%
台　南捐血中心 Tainan	2	37	71	49	32	191	16.32%
高　雄捐血中心 Kaohsiung	1	59	67	36	29	192	16.41%
花　蓮捐血中心 Hualien	1	10	23	17	8	59	5.04%
總計 Total	8	313	413	316	120	1,170	100%
百分比 Rate（%）	0.68%	26.75%	35.30%	27.01%	10.26%	100%	

102年經費收支

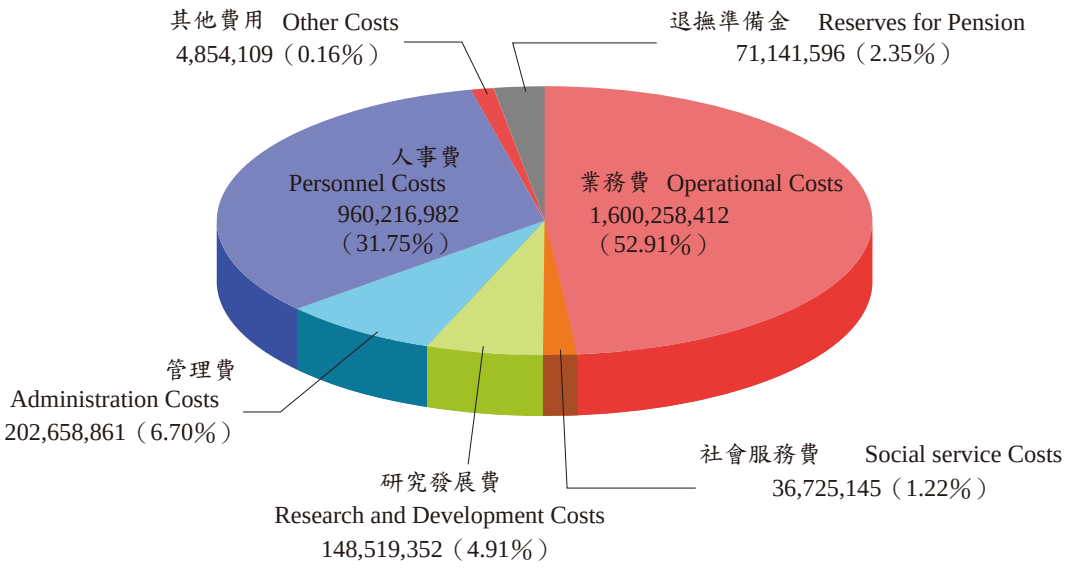
Incomes and Expenditures in 2013

單位：新台幣元
Unit : NT dollar

一、經費總收入 Total Incomes：3,113,622,954



二、經常門支出 Total Expenditures：3,024,374,457



三、經常門結餘 Balance：89,248,497

四、資本門支出 Capital expenditures：33,312,020（設備購置）



附　錄

Appendix



捐血通訊一覽表

Address and Telephone

醫療財團法人台灣血液基金會

10066台北市南海路3號3樓

電話：02-2351-1600　傳真：02-2395-1002

官方網站：www.blood.org.tw　愛捐血網站：www.i-blood.org.tw

【台北捐血中心業務轄區／臺北市、基隆市、新北市、金門、馬祖】

名稱	服務時間	服務電話	地址
台北捐血中心	08:00~17:00	02-2897-1600	臺北市北投區立德路123號 （近捷運忠義站）
捐血站 基隆捐血站	08:00~18:00 （週一延至19:00）	02-2427-8500	基隆市信義區信一路14號1樓
板橋捐血站	08:00~18:00 （週一延至19:00）	02-2952-4117	新北市板橋區中山路一段50巷36號2樓之4 （近捷運府中站2號出口）
捐血室 關渡捐血室	08:00~17:00	02-2897-1600 分機6141	臺北市北投區立德路123號 （近捷運忠義站）
南海捐血室	08:00~17:30	02-2351-1601	臺北市中正區南海路1號3樓 （近捷運中正紀念堂站1號出口）
市府捐血室	09:00~17:00 （週日不作業）	02-2720-8889 分機3383	臺北市信義區市府路1號 （臺北市政府西大門左側，近捷運市政府站2號出口；台北101/世貿站4號出口）
長春捐血室	09:00~17:30 （週日不作業）	02-2731-4801	臺北市松山區復興北路69號5樓 （近捷運南京東路站）
三重捐血室	09:00~17:00 （週一延至18:00；週六不作業）	02-2986-2780	新北市三重區重新路三段81號3樓 （近捷運菜寮站3號出口）
汐止捐血室	09:00~17:00 （週六不作業）	02-2642-8013	新北市汐止區新台五路一段234號6樓之1
新店捐血室	09:00~17:00 （週一延至19:00）	02-2218-8867	新北市新店區民權路95號6樓之2 （近捷運大坪林站1號出口）
捷運捐血室	10:00~18:00 （週一不作業）	02-2370-6880	臺北市捷運台北車站地下1樓，M7出口 （誠品書店旁）



名稱	服務時間	服務電話	地址
定點車 台大號捐血車	09:00~17:00	02-2364-4952	臺北市大安區新生南路三段 （台灣大學側門口，近捷運公館站3號出口）
忠孝號捐血車	11:00~19:00 （週一不作業）	02-2751-2351	臺北市大安區大安路一段瑠公公園旁 （忠孝復興站4號出口，往東區地下街14號出口）
公園號捐血車	10:00~18:00 （週二不作業）	02-2381-1268	臺北市中正區228和平公園內 （襄陽路與公園路口，近捷運台大醫院4號出口）
峨嵋號捐血車	13:00~21:00	02-2375-1189	臺北市萬華區峨嵋街83號 （西門町峨嵋立體停車場旁，近捷運西門站6號出口）
新光站前號捐血車	11:00~19:00 （配合百貨公司活動不定期取消）	0961-236683	臺北市中正區忠孝西路一段66號 （新光摩天大樓廣場前，新光三越站前店，捷運台北車站M6出口）
新莊號捐血車	10:00~18:00 （週五不作業）	02-8994-1488	新北市新莊區中華路一段與復興路一段交叉口新莊綜合運動場旁 （近捷運新莊站1號出口）
中和號捐血車	09:00~17:00 （週六、日不作業）	02-2929-9437	新北市中和區中安街85號 （國立中央圖書館旁823公園內，近捷運永安市場站）
土城號捐血車	09:00~17:00 （週六、日不作業）	02-8262-5140	新北市土城區裕民路171巷裕民廣場內 （近捷運海山站3號出口）

【新竹捐血中心業務轄區／桃園縣、新竹縣、新竹市、苗栗縣】

地點	服務時間	服務電話	地址
新竹捐血中心	08:00~17:00	03-555-6111	新竹縣竹北市光明11路215巷8號
捐血站 桃園捐血站	08:00~18:00	03-332-7651	桃園市文康街61號 （西門國小地下停車場旁）
苗栗捐血站	08:00~18:00	037-274-980	苗栗市為公路 282 號
捐血室 愛心樓捐血室	08:00~17:00	03-551-7113	新竹縣竹北市光明11路215巷8號
長庚捐血室	09:00~17:30 （週日及國定假日不作業）	03-396-0749	桃園縣龜山鄉公西村復興街5號 （林口長庚紀念醫院醫學大樓地下1樓美食街旁）
中壢捐血室	09:00~18:00	03-427-8452	桃園縣中壢市復興路117號2樓 （復興路與中平路交叉口）
西大捐血室	09:30~17:30	03-521-3354	新竹市西大路559號 （市立棒球場大門旁）
頭份捐血室	09:00~17:00 （週二及週四不作業）	037-682-883	苗栗縣頭份鎮仁愛路116號 （為恭醫院中醫部旁）



湖口陸軍裝甲兵學校，捐血救人是最熱血的事情



【台中捐血中心業務轄區／臺中市、彰化縣、南投縣】

名稱	服務時間	服務電話	地址
台中捐血中心	08:00~17:00	04-246-12345	臺中市西屯區臺灣大道四段1176號
捐血站 彰化捐血站	08:00~18:00	04-711-0313	彰化市中山路一段348號
埔里捐血站	08:00~18:00	049-298-1019	南投縣埔里鎮北環路222號
捐血室 中港捐血室	08:00~18:00	04-246-12345 分機101	臺中市西屯區臺灣大道四段1176號
中正公園捐血室	09:00~17:00	04-2236-4473	臺中市北區學士路91號正對面 （中國醫藥大學附設醫院復健大樓正對面）
三民捐血室	08:00~17:00	04-2227-0393	臺中市西區三民路一段174號7樓
定點車 臺中公園捐血車	09:00~17:00 （週一不作業）	04-2223-1085	臺中市北區精武路291之3號對面 （中興堂對面停車場內）
新光三越捐血車	10:00~18:00	04-2251-5683	臺中市新光三越百貨後方惠安停車場內 （市政北七路、惠來路二段路口）
興大捐血車	09:00~17:00 （週六、日及國定假日不作業）	04-2285-9563	臺中市南區國光路、興大路口

【台南捐血中心業務轄區／臺南市、嘉義縣、嘉義市、雲林縣】

名稱	服務時間	服務電話	地址
台南捐血中心	08:00～17:00	06-213-1212	臺南市中西區永福路一段 85 號
捐血站 雲林捐血站	08:00～18:00	05-532-0866	雲林縣斗六市莊敬路 300 號 （成大醫院斗六分院斜對面）
嘉義捐血站	08:00～18:00	05-233-5952	嘉義市博愛路一段 488 號 （近北興陸橋、自由路）
捐血室 愛心樓捐血室	08:00～18:30	06-213-1212 分機 100	臺南市中西區永福路一段 85 號
虎尾捐血室	08:00～17:00 （春節、清明、端午、中秋節不作業）	05-636-1161	雲林縣虎尾鎮光復路 446 號 2 樓
新營捐血室	08:00～17:00 （春節、清明、端午、中秋節不作業）	06-632-8473	臺南市新營區信義街 73 號 （衛生福利部新營醫院東側門）
永康捐血室	08:00～17:00 （春節、清明、端午、中秋節不作業）	06-312-1255	臺南市永康區復興路 427 號 （高雄榮民總醫院臺南分院八樓）
捐血點 嘉義公園車	09:00～17:00 （週一、春節、清明、端午、中秋節不作業）	05-271-1218	嘉義市中山路底與啟明路交叉路口 （家庭教育館斜對面體育場停車場內）
中山捐血車	10:00～18:00 （週日、春節、清明、端午、中秋節不作業）	06-229-5706	臺南市北區公園路上台南公園旁 （兵配廠對面）
成大捐血車	11:00～18:00 （週日、春節、清明、端午、中秋節不作業）	06-208-2670	臺南市東區大學路上與勝利路交叉口



【高雄捐血中心業務轄區／高雄市、屏東縣、澎湖縣】

名稱	服務時間	服務電話	地址
高雄捐血中心	08:00~17:00	07-366-0999	高雄市楠梓區高楠公路 1837 號
捐血站 屏東捐血站	08:00-17:30	08-752-1917	屏東市和平路 71 號
馬公捐血站	08:00-18:00 （週二、週三、週四不作業）	06-926-2606	澎湖縣馬公市中山路 62 號
捐血室 楠梓捐血室	08:00-17:00	07-364-1832	高雄市楠梓區高楠公路 1837 號
捷運三民捐血室	09:30-18:00	07-313-7631	高雄市三民區博愛一路220號 （捷運後驛站B1，2號出口）
前金捐血室	09:00-17:30	07-282-7465	高雄市前金區中華三路 7 號 6 樓
岡山捐血室	09:00-17:00	07-621-6524	高雄市岡山區壽華路 58 號
捷運前鎮捐血室	09:30-17:30	07-813-7149	高雄市前鎮區翠亨北路 225 號 （捷運前鎮高中站 B1，1 號出口）
左營捐血室	09:30-18:00	07-348-7155	高雄市左營區博愛三路 635 號
捷運鳳山捐血室	09:30-17:30 （週一不作業）	07-745-9181	高雄市鳳山區光遠路 226 號 （捷運大東站 B1，1 號出口）
捐血車 文化號捐血車	10:00-18:00 （週一、週二、週四不作業）	07-223-4708	高雄市苓雅區和平一路 （高師大斜對面）
鳳山金聲號捐血車	09:00-18:00 （週三不作業）	07-747-3421	高雄市鳳山區立志街 （鳳凌廣場前）

【花蓮捐血中心業務轄區／花蓮縣、宜蘭縣、臺東縣】

名稱	服務時間	服務電話	地址
花蓮捐血中心	08:00~17:00	03-856-0990	花蓮縣花蓮市中山路一段170號
捐血站 宜蘭捐血站	08:00~17:00	03-932-5544	宜蘭縣宜蘭市擺厘路16-7號
台東捐血站	08:00~17:00	089-221-995	臺東縣臺東市四維路三段198號
捐血室 花蓮捐血中心捐血室	08:00~17:00	03-856-0990 分機123	花蓮縣花蓮市中山路一段170號
定點車 萬連號羅東定點車	10:00~16:00 （週二、週四、週六及春節不作業）	03-957-6206	宜蘭縣羅東鎮中興路3號 （羅東鎮公所前停車場內）



龍巖慈善基金會辦理捐血活動



Address and Telephone

Head Office

Taiwan Blood Services Foundation
3 Fl. No. 3 Nan-Hai Road, Taipei 10066, Taiwan, R.O.C.
TEL : 886-2-2351-1600 FAX : 886-2-2395-1002
Website : www.blood.org.tw
www.i-blood.org.tw

Regional Office

Taipei Blood Center
No. 123 Lih-Der Road, Taipei 112, Taiwan, R. O. C.
TEL : 886-2-2897-1600 FAX : 886-2-2897-1601
Executive Region : Taipei City, New Taipei City, Keelung City, Kinmen County, Matsu County

Hsinchu Blood Center
No. 8, Lane 215, Guangming 11th Road, Jhubei City, Hsinchu County 302, Taiwan, R.O.C.
TEL : 886-3-555-6111 FAX : 886-3-555-0305
Executive Region : Taoyuan County, Hsinchu County, Miaoli County

Taichung Blood Center
No. 1176, Sec. 4, Taiwan Boulevard, Xitun Dist., Taichung City 407, Taiwan, R.O.C.
TEL : 886-4-2461-2345 FAX : 886-4-2461-3939
Executive Region : Taichung City, Changhwa County, Nantou County

Tainan Blood Center
No. 85 Sec. 1, Yongfu Road Tainan 700, Taiwan, R.O.C.
TEL : 886-6-213-1212 FAX : 886-6-213-3201
Executive Region : Tainan City, Chiayi City, Chiayi County, Yuenlin County

Kaohsiung Blood Center
No. 1837 Gaunan-Gung Road, Kaohsiung 811, Taiwan, R.O.C.
TEL : 886-7-366-0999 FAX : 886-7-364-1556
Executive Region : Kaohsiung City, Pingtung County, Penghus County

Hualien Blood Center
No. 170, Sec. 1 Jhongshan Road, Hualien 970, Taiwan, R.O.C.
TEL : 886-3-856-0990 FAX : 886-3-857-5190
Executive Region : Hualien County, I-Lan County, Taitung County

捐 血 者 健 康 標 準

Criteria for Donor Selection

中華民國95年3月15日衛署醫字第0950207650號令發布

第一條　本標準依血液製劑條例第十四條第二項規定訂定之。

第二條　捐血者須符合下列條件，始得捐血：

一、年齡：

（一）17歲以上，65歲以下，一般健康情況良好。

（二）未滿17歲者，應視體能狀況，並經法定代理人之同意，始得捐血。

（三）逾65歲者，除應健康情況良好外，並應取得醫師之同意，始得捐血。

二、體重：

（一）女性應45公斤以上，男性應50公斤以上。

（二）捐分離術血小板、分離術白血球及分離術血漿者，應50公斤以上。

三、體溫：口溫不超過攝氏37.5度。

四、血壓：收縮壓90-160毫米汞柱，舒張壓50-95毫米汞柱，如兩者之距離低於30或高90毫米汞柱，須經醫師許可。

五、血液檢查：

（一）血紅素：男性13公克%以上（使用硫酸銅法時血液比重1.054）。女性12公克%以上（使用硫酸銅法時血液比重1.052）。

（二）血小板：捐血小板者，其血小板數目應在15×10,000/mm^3以上。

（三）白血球：捐白血球者，其絕對顆粒球數目應在3,000/mm^3以上。

（四）血漿總蛋白：捐血漿者，應於首次捐血暨每隔半年加驗血漿總蛋白量，其血漿總蛋白應在6g/d1以上。

第三條　捐血者每次之捐血量及捐血間隔如下：

一、每次捐血以250毫升為原則，但體重60公斤以上者，每次捐血得為500毫升。

二、每次捐血250毫升者，其捐血間隔應為2個月以上；每次捐血500毫升者，其捐血間隔應為3 個月以上。但男性年捐血量應在1,500毫升以內；女性年捐血量應在1,000毫升以內。

三、捐分離術血小板、分離術白血球或分離術血漿者，每次之間隔為2星期以上。

四、捐分離術血漿量每次以500毫升為限，其全年捐血漿量不得超過12公升。

第四條　捐血者有下列情形之一者，應暫緩捐血：

一、婦女懷孕中或產後（含流產後）6個月以內者。

二、大手術未滿1年或1年內曾接受輸血者。

三、4星期內曾接種麻疹、德國麻疹、腮腺炎及小兒麻痺（口服）等活性減毒疫苗者。

四、6個月內曾罹患肝炎或密切接觸肝炎病患者。

五、現患梅毒、活動性結核病、糖尿病、心臟病、消化道潰瘍出血、高血壓、腎臟病、哮喘、感冒、急性感染、傳染病、過敏病症者。

六、自瘧疾疫區回國1年內或曾在3年內罹患瘧疾者。



七、 曾在72小時內拔牙者。
八、 曾在5天內服用含Aspirin類藥物或其他可抑制血小板功能之藥物者，不得捐血小板。
九、 B型肝炎表面抗原檢查呈陽性反應者。
十、 C型肝炎病毒抗體檢查呈陽性反應者。
十一、 民國69年至85年間曾在英國輸血或曾至英國旅遊或居留時間合計超過3個月者，或民國69年以後曾於歐洲旅遊或居留時間合計超過五年者。
十二、經通報為嚴重急性呼吸道症候群疑似或可能病例，於治療痊癒後，未逾3個月內者。
十三、曾與嚴重急性呼吸道症候群疑似或可能病例密切接觸，於最後接觸日起1個月內者。
十四、 自有地區性傳播嚴重急性呼吸道症候群之地區回國後1個月內者。
十五、 自西尼羅病毒流行區離境日起1個月內者。
十六、 懷疑自己感染愛滋病毒者或2年內曾與可能感染愛滋病毒者發生性行為者。
十七、 1年內曾從事危險性行為或曾罹患性病（梅毒、淋病、披衣菌、生殖器皰疹、軟性下疳、尖型濕疣等）者。
十八、 1年內曾刺青者。

第五條　捐血者有下列情形之一者，永不得捐血：

一、 曾患惡性腫瘤、白血病或其他經醫師認為永久不得捐血者。
二、 曾有出血不止、抽痙或昏迷之病史者。
三、 曾有吸毒或慢性酒精中毒者。
四、 靜脈注射藥物成癮者、男性間性行為者及長期使用血液製劑者。
五、 曾為AIDS患者。
六、 愛滋病毒第一型及第二型（HIV-I / HIV-II）抗體檢查經確認呈陽性反應者。
七、 人類嗜T淋巴球病毒第一型（HTLV-I）抗體檢查經確認呈陽性反應者。
八、 曾罹患庫賈氏病者（CJD）、曾注射人類腦下垂體生長荷爾蒙者、曾注射人類腦下垂體親生殖腺素（human pituitary gonadotropins）者、曾注射牛胰島素等生物製劑者、曾接受硬腦膜移植者或家族中有庫賈氏病（CJD）患者。
九、曾從事性工作者。

第六條　捐血機構對捐血者實施健康篩檢之項目如附表。

第七條　本標準自發布日施行。

附表：捐血者健康篩檢項目

Screening Items for Blood Donors

一、體重：女性應45公斤以上，男性應50公斤以上。

二、體溫：口溫不超過攝氏37.5度。

三、血壓：收縮壓90~160毫米汞柱，舒張壓50~95毫米汞柱，如兩者之距離低於30或高於90毫米汞柱，須經醫師許可。

四、血液檢查

（一）血紅素：男性13公克%以上（使用硫酸銅法時血液比重1.054）。女性12公克%以上（使用硫酸銅法時血液比重1.052）。

（二）血小板：捐血小板者，其血小板數目應在15×10,000/mm^3以上。

（三）白血球：捐白血球者，其絕對顆粒球數目應在3,000/mm^3以上。

（四）血漿總蛋白：捐血漿者，應於首次捐血暨每隔半年加驗血漿總蛋白量，其血漿總蛋白應在6g/d1以上。

五、ABO血型檢驗。

六、Rh血型檢驗。

七、紅血球異體抗體篩檢。

八、血清轉胺檢驗（ALT）。

九、梅毒血清檢驗（STS）。

十、B型肝炎病毒表面抗原檢驗（HBsAg）。

十一、人類免疫缺乏病毒第一型、第二型抗體檢驗（Anti-HIV-1/2）。

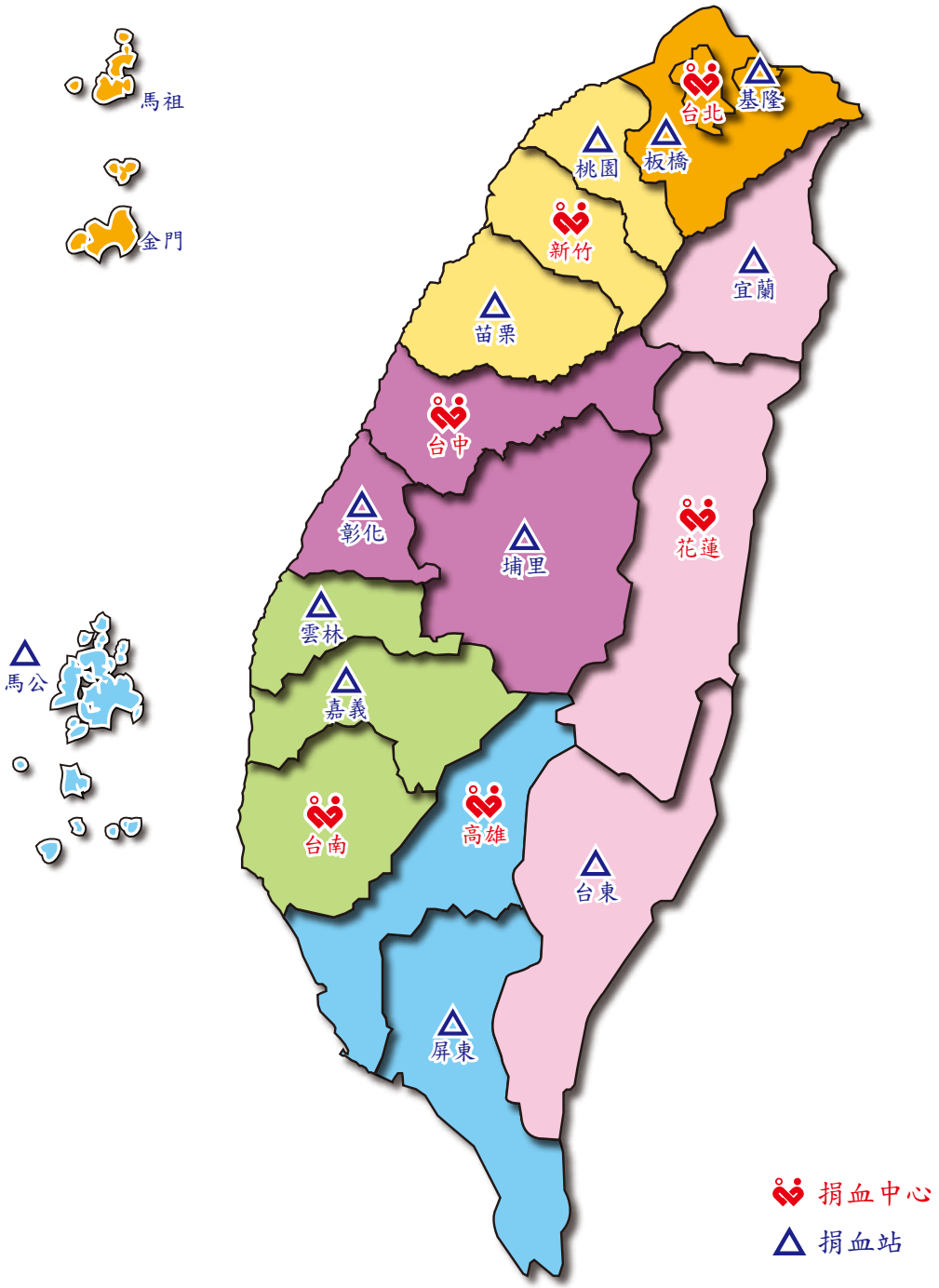
十二、C型肝炎病毒抗體檢驗（Anti-HCV）。

十三、人類嗜T淋巴球病毒第一型、第二型抗體檢驗（Anti-HTLV-I/II）。



捐血機構分佈

Distribution of Blood Collection Facilities





論文摘要

Research Abstracts



Human Platelet Antigen Alleles in 998 Taiwanese Blood Donors Determined by Sequence-Specific Primer Polymerase Chain Reaction

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Polymorphism of human platelet antigens （HPAs） leads to alloimmunizations and immune-mediated platelet disorders including fetal-neonatal alloimmune thrombocytopenia （FNAIT）, post-transfusion purpura （PTP）, and platelet transfusion refractoriness （PTR）. HPA typing and knowledge of antigen frequency in a population are important in particular for the provision of HPA matched blood components for patients with PTR. We have performed allele genotyping for HPA-1 through -6 and -15 among 998 platelet donors from 6 blood centers in Taiwan using sequence-specific primer polymerase chain reaction. The HPA allele frequency was 99.55, and 0.45% for HPA-1a and -1b; 96.49, and 3.51% for HPA-2a and -2b; 55.81, and 44.19% for HPA-3a and -3b; 99.75, and 0.25% for HPA-4a and -4b; 98.50, and 1.50% for HPA-5a and -5b; 97.75 and 2.25% for HPA-6a and -6b; 53.71 and 46.29% for HPA-15a and -15b. HPA-15b and HPA-3a, may be considered the most important, followed by HPA-2, -6, -1, -5, and -4 systems, as a cause of FNAIT, PTP, and PTR based on allele frequency. HPA-4b and HPA-5b role cannot be excluded based on their immunogenicity. A larger-scale study will now be conducted to confirm these hypotheses and to establish an apheresis donor database for the procurement of HPA-matched apheresis platelets for patients with PTR.

BioMed Research International 2013



B303 is the most frequent allele among Taiwanese B3/AB3 donors

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Background： B3 / AB3 phenotypes were found over 67% among ABO subgroups （including para-Bambay） in Taiwan. B3 phenotype was first reported in 1972 and it was characterized by mixed filed agglutination with anti-B and anti-A,B, and absence of anti-B in the serum. The agglutinated and unagglutinated cells of mixed-filed reaction can be observed through microscope and column agglutination technique. B303 and B304 alleles were published among Taiwanese, which B303 harbored an [IVS3] + 5G --> A mutation and B304 allele harbored a 247G --> T mutation. In this study we randomly collected 39 cases of B3 phenotype and 26 cases of AB3 phenotype to analyze the phenotypic characters and the variation of their ABO gene.

Study Design/Methods： A total of 65 cases of B3/ AB3 phenotypes were collected. Serological phenotyping were done by commercially available monoclonal antisera and RBC panels. Agglutinations with monoclonal anti-B were observed microscopically. Column agglutination technique was utilized to detect the mixed-field reaction. Sequence analysis of ABO gene was done as well.

Results： In the 65 cases of B3 / AB3 phenotypes, mixed-field agglutinations with monoclonal anti-B were observed. Weak anti-B antibodies in serum were found in 13 cases. All cases were genotyped as B/O or A/B heterozygotes with common O01, O02 or A102 alleles. Analyzing the B alleles, 49 of them have B303 allele, 5 have Bw12 allele （278C>T）, 4 had Bw11 allele （695T>C）, 1 had Bw03 allele （721C>T, which was also shown in Aw04 allele） and 1 had Bw05 alleles （539G>A, which was also shown in A304 allele）. In addition, one cases of B111 allele （306C>T） and 4 cases of B101 allele were found in AB3 cases.

Conclusion： Column agglutination technique is a good way to detect mixed-field agglutination of B3/ AB3. Sequence analysis is required for detailed sub-grouping. From this study, B303 is the most frequent allele which is about 75% （49/65） of B3/ AB3 cases. Eleven cases were found to have Bw alleles, including Bw03, Bw05, Bw11, Bw12 alleles. Weak anti-B occurring rate is 20% （13/65）. Ten of B303 cases and 3 of Bw11 cases had weak anti-B in sera but not continuously shown in every donation of each donor. Notably, 4 AB3 cases have common B101 allele and 1 has B111 allele.

Transfusion, 2013; 53 （supple.S2）: 145A

Hemolysis Upon Plateletpheresis

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Background： Hemolysis found upon plateletpheresis （PH） is a rare adverse event, according to the operation manual of Hemonetics MCS and Terumo BCT Trima machine. An episode of hemolysis drew our attention, after a call back from a blood donor at home, complained gross hematuria post-PH.

Aims： The purpose of this study is：1） to diminish the incidence of hemolysis; 2） to avoid inducing gross hematuria in PH donors; and 3） to educate nurses and engineers on how to differentiate hemolysis from RBC spillage.

Methods： The collection of hemolysis cases upon PH was started in June 2012, when a reported case of suspected RBC spillage into the plasma bag during the 1 cycle and the PH procedure was not discontinued . Since then till August 2013, there have been 8 reported episodes of RBC spillage in the plasma bag （Figure 1） during PH procedure in MCS machine （Table 1）. These were verified as hemolysis by means of free Hemoglobin measurement of discolored plasma in 3 out of 4 cases. There was also 1 case of suspected RBC spillage in both platelet and plasma bag during PH procedure in Trima machine （Table 2）. Unfortunately, free hemoglobin was not measured. Photographs were taken and adverse events were documented in the most recent 7 cases.

Results： Of the 8 episodes of suspected hemolysis during PH procedure in MCS machine, all occurred during the first cycle. Platelet collection in the first 2 donors were not discontinued immediately, resulting in gross hematuria in donor No. 2. Upon reviewing the photographs, 4 of the procedure were caused by obvious kinking at Y- shape outlet tube from Dual pump at the edge of the bowl in MCS machine （Figure 2 & 3-1,2）. The episode of hemolysis during usage of the Trima machine was caused by a sliding centrifuge line at the lower bearing point at 11 minutes （Figure 4）, which was corrected. However, the problem recurred at 80 minutes. The procedure was terminated, the plasma and platelet bag were found red discolored. Unfortunately, free Hemoglobin was not measured.

Summary： Based on these 9 episodes of hemolysis during the PH procedure, we learned that red discoloration of the plasma bag is usually caused by hemolysis （7 out of 9 cases, excluding donors No. 1 & 7, Table 1）, upon which the procedure should be terminated. Discoloration of the platelet bag is usually due to RBC spillage. However, hemolysis still could occur, which can be proved by laboratory evaluation only. Step by step installation of different parts of Hemonetics MCS bags, tubes and bowl is instructed to the nurses by photographs.

Vox Sanguinis, 2013；（Supple.2）：60



Table 1.

Basic Informations of Hemolysis during PH with Haemonetics MCS machine

Donor	Date	Donor				Machine		Hemolysis (%)
		Sex	MCV	History of RBC Spillege	Gross Hematu ria	Cycle	tube bending	
1	2012-June.	M	84.4	0/10		First		N.D**
2	2012-Aug.	M	88.9	0/48	Yes	First		N.D
3	2012-Oct.	M	94.1	0/3		First	Yes*	N.D
4	2012-Oct.	M	93.7	0/0		First	Yes*	N.D
5	2013-Jan.	M	84.1	0/18		First	Yes*	98.8%
6	2013-June.	M	90.2	0/50		First		99.9%
7	2013-June.	M	87.9	0/9		First		0%
8	2013-Aug.	M	92.2	0/49		First	Yes*	86.5%

* located at Y-shape outlet tubefromDual-pump manifoed atthe edge of bowl （Fig.2） ** Not Done



Fig. 1 : RBC spillage in donor 8, plasma bag.



Fig. 2: Kinking at Y-shape outlet tube from Dual-pump at the edge of bowl.



Fig. 3-1: Smooth angulate outlet tube from Dual-pump to the bowl. No hemolysis . Case not included in Table 1.



Fig. 3-2: Sharp kinking at Y-shape outlet tube from Dual-pump.



Fig. 4: Sliding centrifuge line at the lower bearing point.

Table 2.

Basic Informations of Hemolysis during PH with Terumo BCT machine

Donor	Date	Donor			Machine		Hemolysis (%)
		Sex	MCV	History of RBC Spillege	time	tube bending	
1	2012-Nov.	M	90.1	0/10	1) 11mins 2) 80mins	Yes	N.D

Five Years' Experience in Recruiting Repeat Blood Donors by Presenting Them with Birthday Souvenirs

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Background： The Hsinchu Blood Center obtains more than 230,000 blood donations every year. Constantly recruiting new donors is an important function of such a blood center. However, the percentage of new donors between the ages of 17 and 25 decreased from 13.3% in 2001 to 9.1% in 2010. Hence, it was urgently required that the population of active repeat donors be consolidated and the habit of donation be promoted.

Aims： This program, which includes the giving of birthday souvenirs, was designed with the following aims:

to preserve a substantial resource of blood,

to get people into the habit of blood donation,

to call on active donors to supplement the resources, and

to establish good relationships with repeat donors.

Methods： For a long time, the blood donor's birthday was used as the start and end point to manage annual individual quantities. A notice via a mailed letter, cellphone message, or email one month before a donor's birthday was sent as part of the program, and the donors loved this. Since 2008, this program has been improved with the donors being informed via their registered email to go to a nearby blood collecting room to receive a birthday souvenir. To uphold the blood center's principle of non-remuneration, the cost of the souvenirs was restricted to less than USD 2. Most of the funds were sponsored by social clubs on a limited budget. The conditions of donor selection improved from three donations to four donations per person within two years.

Results： For the years between 2008 and 2012, the numbers of donors who arrived at the blood center to receive the souvenir were 6,777, 8,182, 6,047, 6,388, and 5,210, respectively. The impact of the program seems to be declining, but the percentages, which were 27.8%, 41.5%, 47.9%, 49.2%, 53.7% during this period, of donors who gave blood at the moment getting the souvenir rose year after year. This program actually can be improved to ensure active participation. We found that emails are more effective than mobile phone messages and letters. Repeat donors from amongst those possessing email accounts improved from 49.7% in 2009 to 59.8% in 2012. The email mode of communication saved much correspondence expense. Meanwhile, the staff's positive attitude and good quality of service to blood donors was displayed through the birthday celebrations. Growing awareness, and recognition and sponsorship by NPO clubs and enterprises were other significant achievements.



Conclusion： Inevitably, there have been complaints from a few donors who claimed that certain conditions were not met, and unfair to donors who didn't have an email account. Some donors asked about the contents of the souvenirs and denied receiving it just because the low cost made them dislike it. There were only 20 complaints in the last 5 years （0.02%） that were unanticipated. Thus, this program can still be used to exploit opportunities to learn new things about the characteristics of repeat donors and media used for blood donor recruitment.

Vox Sanguinis, 2013 ; 105 （Supple.1） : 74

A retrospective study of adverse reactions and impact on subsequent behavior in blood donors: contributory role of age, gender, weight, donor status and collection sites

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Background： Adverse reactions occur in a small number but significant of blood donors. Adverse reactions may cause injuries and become an unfavorable incentive for repeat donation. Studies have evaluated the relevant blood donor reactions to specific donor characteristics.

Aims：The objective of this study was to define specific donor characteristics such as age, gender, weight, donor status, occupation and collection sites, then analyzed the subsequent donation behavior in donors with adverse events.

Methods： There were 1,021 blood donors found to have adverse reactions during 2010 to 2011, and these donor retention were evaluated for the following 12 months. In addition, specific donor characteristics were examined and discussed. Bivariate analysis by chi-square tests were performed and p value less than 0.05 was considered to be statistically significant.

Results： A total of 1,021 donors with adverse reactions were available for analysis in 750,243 donations during 2010 and 2011. Age under 31 years （75.12%）, weight less than 61kg （48.38%）, unmarried （76.08%）, students （47.31%） and in mobile sites donors （79.43%） had higher adverse event rates than other donors. The return rates for 1,021 donors with adverse reaction are only 24% within one year follow-up. The age, gender, weight, donor status, occupation and collection sites were observed to have significant effect （$p < 0.05$） for return behavior. In the 17-20 year age group, male, weighting between 61-70kg, repeat donors, donating 500ml, unmarried , student and collection in mobile sites had higher return rates （32.65%, 62.45%, 31.84%, 82.86%, 43.27%, 65.71%, 40%, and 62.45% respectively）than other subgroups in the following one-year period among donors with adverse reactions.

Conclusions： To ensure safety of donor and recipient, and maintain adequate blood supply at the same time is always our top missions. With more refined understanding of the risk factors for adverse event, it allows blood collectors to decide which collection methods are the best choices for specific donor groups, subsequently leads to lower rate of adverse reactions among blood donors.

Vox Sanguinis, 2013: 105 （Suppl.1）: 119



Comparison of platelet function and plasticizer amount of TOTM and DEHP PVC blood bags

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Background： Platelet container made of JMS thin wall polyvinyl chloride （PVC）–C507 plasticized with diethylhexyl phthalate （DEHP）is currently used in Taiwan blood center. As certain people reckon DEHP in blood bag has potential risk to human health, therefore JMS produced DEHP-free-5DPC: TOTM （Tri-Octyl Trimellitate） to assay the plasticizer amount, as well as the survival of platelet concentration during the storage period.

Aims： The study was to evaluate and compare the data of platelet survival test, and the plasticizer amount extracted in JMS platelet storage container made of PVC plasticized with DEHP （Di-ethyl hexyl phthalate ） and TOTM （ Trioctyl- trimellitate ）.

Methods： Two independent storage bags made of DEHP and TOTM were examination under ISO 3826-1 test and simulated platelet storage condition methods, but the simulated platelet storage condition was tested for the 7 days period. Two-stage analysis was applied to investigate the data of platelet survival test from respective DEHP and TOTM blood bags both from thirty blood donors . At the first stage, a linear regression model was used to estimate the slope （1, 3, 5 and 7 days）of platelet count results, MPV, swirling score, platelet function testing consisting of platelet aggregation induced by ADP and Collagen, the tests for extent of shape change （ESC） and hypotonic shock response （HSR）, blood gases and metabolic variables over time within each subject. At the second stage, two-sample t tests were applied to compare the slopes estimated from the first stage to explore the independent effects of DEHP and TOTM blood bags.

Results： Based on ISO 3826-1 test, the amount of DEHP extracted from 5DPC （TOTM） storage bags with an average reading of 0.21 mg/100ml, which was significantly lower compared to an average reading of 11 mg/100ml from 5DPC （DEHP）storage bags. Test results based on the simulated platelet storage condition test demonstrated that the total quantity of plasticizer extracted from 5DPC （TOTM）storage bags was 33 times lower than 5DPC （DEHP） storage bags with an average reading of 7.6 mg/100ml for DEHP 5DPC Bag and 0.23 mg/100ml for TOTM 5DPC Bag. Swirling was well preserved, and the pH in both containers were maintained at acceptable level （≧6.2） up to 7 days. Compared with TOTM blood bags, the average decrease per day in collagen, HSR and ESC for DEHP storage bags was significantly higher （-7.47 ± 2.82 vs. -4.92 ± 2.61 for collagen, $p=0.001$; -3.26 ± 1.23 vs. -1.64 ± 1.71 for HSR, $p<0.001$; -1.25 ± 0.59 vs. -1.00 ± 0.32 for ESC, $p=0.048$）. Rate of glucose metabolism and lactate production were higher in TOTM 5DPC Bag than DEHP 5DPC Bag.

Conclusions： The results indicated both DEHP and TOTM bags were suitable for platelet storage, however, TOTM bags maintain higher collagen-induced platelet aggregation, HSR and ESC level in clinical data. In addition, the benefit of TOTM bag has much lower plasticizer amount than DEHP bag both under ISO 3826-1 （37±1）℃ method and actual usage （22±2）℃ condition.

Vox Sanguinis, 2013；105 （Suppl.1）: 143



Analysis of Partial D and Weak D Blood Donors in Taiwan

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Background： The RHD gene is highly polymorphic and the existence of a large number of alleles results in RhD variant phenotypes. Monoclonal antibodies （MoAb）are being developed to identify D variants such as partial D and weak D; however, molecular analysis offers a tool for further classification of weak and partial D. The purpose of this study was to investigate the molecular and serologic characterization of donor samples with partial D and weak D type.

Methods： From 2006 to 2012, 71 samples demonstrated D negative in tube methods but positive reactions at AHG phase （Du test）were categorized as weak D. The samples were identified for the partial D phenotype by Partial RhD Typing Kit. Of them, 17 genomic DNA of donors were collected to study by using commercial genotyping kits and zygosity test. In addition, nucleotide sequencing of RHD was performed to confirm the discrepancy of the phenotype and the genotype.

Results： According to the serologic reactions, 71 samples can be divided to DFR （n=35）, DVI （n=16）, DOL （n=1）, weak D （n=13）, indeterminate （n=6）. The genotyping results show that the DFR phenotype represent weak D type 15 and some cases contain the alleles of weak D type 15 and RHD 1227A. The group of DVI phenotype was categorized as DVI Type 3 allele. Two cases of indeterminate results show the same triplet deletion （686-688delGAA）at exon 5 of RHD and their serologic reactions are similar to DVL-1.

Conclusion： Majority of weak D phenotypes in Taiwan population are identified to be Partial D type （DVI type 3） and Weak D type 15.

Transfusion, 2013; 53（supple.S2）: 169A

A Lower Level of sCD40L Found in Leukoreduced Platelets

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Background： Platelet-derived pro-inflammatory mediators, including soluble CD40 ligand （sCD40L）, that accumulates during blood products storage may lead to non-immune transfusion-related acute lung injury （TRALI）.

Aims： To analyze the change in sCD40L in platelets with leukocyte reduction and, futher, to know the outcome of leukoreduction for sCD40L-mediated TRALI.

Methods： Platelet products were collected from voluntary donors between August 2012 and October 2012. After donation at day1,3 and 5 days, sCD40L level were determined by flow cytometry for MCS+ PH （ n = 30）, MCS+ LR-PH （ n=30） and in Trima LR-PH （ n =30）.

Results： The level of sCD40L was increased in stored Apheresis Platelets （PH） in a time-dependent manner. MCS+ PH （Day1: 3239 ±1313 pg/mL, Day5: 4104 ±1324 pg/mL）, MCS+ RL-PH （Day1: 2688 ±1006 pg/mL, Day5: 3297 ±986 pg/mL）, and Trima RL-PH （Day1: 2460 ±737 pg/mL, Day5: 3417 ±1174 pg/mL）. Taken together, these data indicate that the level of s CD40L in stored Apheresis Platelets Leukocyte Reduced （RL-PH） was lower than those in Apheresis Platelets （PH）.

Summary： A lower levels of sCD40L were found in leukocyte reduced. This suggest that leukocyte reduced components platelets ,as compared to platelets without leukoreduction may mitigate the risk of TRALI.

Vox Sanguinis, 2013 ;（Supple.2）：105



Human Platelet Antigen Alleles in Taiwanese Blood Donors

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Background： Human Platelet Antigens （HPA） alloimmunization is implicated in several immune clinical conditions. In most clinical situations, appropriate treatment requires HPA-compatible platelet transfusion. The HPA antibodies involved in alloimmunization are commonly induced by the HPA antigen. Of the HPA with clinical significance like HPA-1, -2, -3, -4, -5, -6 and -15, it is of great interest to know those that occurred commonly in our population. And a donor pool was analyzed for that particular HPA will enable the selection of platelets for patients with HPA alloimmunization.

Aims： To analyze the HPA including, HPA-1, -2, -3, -4, -5, -6 and -15 in our donor population. To compare our results with the previous published data in Taiwan.

Methods： A total of 998 blood samples were collected from platelet donors and the genomic DNA were extracted. HPA genotyping was performed using a commercial typing kit on the basis of polymerase chain reaction technique with sequence specific primers （PCR-SSP） for HPA-1, -2, -3, -4, -5, -6, and -15. Additionally, selected samples were sequenced to validate the results of HPA SSP genotype. All donors were informed and consented to participate in this study.

Results： The HPA genotypes found are: 1a/1a – 99.1%, 1a/1b –0.9%; 2a/2a – 93.2%, 2a/2b – 6.6%, 2b/2b – 0.2%; 3a/3a – 29.6%, 3a/3b – 52.3%, 3b/3b – 18.0%; 4a/4a – 99.5%, 4a/4b – 0.5%; 5a/5a – 97.0%, 5a/5b –3.0%; 6a/6a – 95.6%, 6a/6b – 4.3%, 6b/6b – 0.1%; 15a/15a – 28.4%, 15a/15b –50.7% and 15b/15b –21.0%. Of these donors, we found 2 cases of HPA-2b/2b and 1 of HPA-6b/6b. None case was found with the type HPA-1b/1b, -4b/4b and -5b/5b in this study. The HPA allelic frequencies found is similar to many other reports.

Conclusions： These results suggest that in Taiwanese, HPA-15 and HPA-3 should be considered in priority, and considered most important followed by HPA-2, -6, -1, -5 and -4, as a likely cause of feto-natal alloimmune thrombocytopenia （FNAIT）, post-transfusion purpura （PTP）, and platelet transfusion refractoriness （PTR）. A larger-scale study will now be conducted to confirm this hypothesis and to establish an apheresis donor database that will be used for the procurement of HPA-matched apheresis platelets for patients with PTR.

Vox Sanguinis, 2013 ; 105 （Supple.1） : 238

Determination of The Sample Pool Size for a Nucleic Acid Test Through Its Ability to Detect a Low Level of Virus

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Background： For a large laboratory that performs screening on thousands of donor samples per day, it would be of great benefit by using an efficient pool testing without decreasing detection sensitivity. Compared to the performance of cobas MPX on mini-pools of 6, we evaluated whether Procleix Ultrio Plus Assay on mini-pools of 8 could meet the same 95% LODs detection limits for HBV 25 IU/ml, HCV 70 IU/ml and HIV 300 IU/ml.

Aim： This study is to validate the LOD of a new version of NAT, Procleix Ultrio Plus Assay, which is declared by manufactuer as an improved sensitivity on detecting HBV, and thus to determine the sample pool size used for routine donor screening.

Methods： Sensitivity performance was determined by WHO NIBSC international standards for HBV （97-750）, HCV （06-100）, and HIV （97-650）, which were destined diluted to 25, 70 and 300 IU/ml by DDL laboratory. Each standard was pooled with plasma from seven healthy donors confirmed negative by ID-NAT, Anti-HBs, Anti-HBc, alternative Anti-HCV and HIV Western Blot. Seventy HBV, twenty HCV and twenty HIV pooled samples were subjected to Procleix Ultrio Plus Assay at two laboratories. The significant 95% LODs for each virus was determined by one-sample proportion test.

Results： End-point dilution for NIBSC standards were listed as followed: HBV 21 IU/ml, HCV<43 IU/ml and HIV 382 IU/ml. Positive probability were corrected to HBV 93%, HCV 85% and HIV 97% using probit analysis. By two-tailed tests, HBV pooled samples should be detected at least 61 in each center and 125 combined, 14 and 30 for HCV, 18 and 37 for HIV. Our results showed that, 68 and 66 HBV pooled samples were detected respectively at the two laboratories. Similar results were obtained for HCV （20 /19）and HIV （20/20）.

Conclusions： Using Procleix Ultrio Plus Assay on mini-pools of 8 would be as sensitive as expected. Further, the detecting abilities of the new-version NAT for pooled samples （8 samples） are as well justified by archiving the 95% LOD of the commonly accepted NAT, either cobas MPX on pool of 6 samples or Procleix Ultrio on individual sample, for the viruses.

Vox Sanguinis, 2013 ; 105（Suppl. 2）, 81


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誠信、和諧、效能、創新的原則永續發展，

成為台灣安全醫療用血來源的領航者。

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