“Walking-Blood-Bank”

Blood saves lives...

Experience, especially in the form of accidents, has shown us again and again, how important it is to know one’s blood group. Depending on what the injuries are, and how serious they are, victims of accidents may first need an instant blood transfusion before they can have any other treatment.

Although all major hospitals In Nairobi do have a limited amount of blood available for transfusion, in most cases they will only use this once they have confirmed they will be able to replace this adequately.

The Regional Medical Office (Regionaldienststelle) of the German Embassy has put together a list of blood groups together, the so-called “Walking Blood Bank.” You too, can register yourself on this list, as a blood donor, which would then also allow you to be a recipient of a blood transfusion should the need arise.

How does the Walking Blood Bank operate?
When the Embassy is informed about a badly injured person from the “Community”, it provides the hospital and / or the air rescue service with the correct blood group of the patient. It then identifies donors on the list with the same blood group and informs them that their blood is required for an emergency case (patient details remain anonymous). If the donor wishes to give blood, the embassy organises with the doctors in charge for the blood to be donated at a specific hospital.

Are you interested in participating in the “Walking Blood Bank” programme?
If you would like to be part of this blood donation, life-saving programme, I request you to fill out the attached form, and hand it in to us (all data will be handled confidentially).
In addition to giving us your blood group, it is essential we have your address as well as your mobile telephone number, so that we can contact you if the need arises. On the reverse side of the attached form, I request you to stick your blood group certificate (available from all major hospitals), as we will only be able to accept your application with this certificate.

Many thanks for your co-operation,
To
Regionalarztdienststelle
German Embassy
P. O. Box 30180
00100 Nairobi

RE: APPLICATION FOR PARTICIPATION IN THE “WALKING BLOOD BANK”

In an emergency I would volunteer to donate blood. Whether I can donate blood or not in this case will be decided upon by a doctor.
I agree these details can be passed on to third persons (e.g. attending doctor, rescue services, other medical facilities).

SURNAME: __________________________________________

OTHER NAMES: ______________________________________

DATE OF BIRTH: ____________________________________

ORGANISATION / COMPANY: ___________________________

Telephone Numbers:
Home: ________________________________
Office: ________________________________
Mobile: ________________________________

E-mail address: ______________________________________________________

Address: __________________________________________

My Blood Group is: ________________________________

Chronic or acute illnesses: ______________________________________

Date, Signature: __________________________________

(Please stick a copy of the blood group certificate on the reverse of this form, or attach it to this form.)