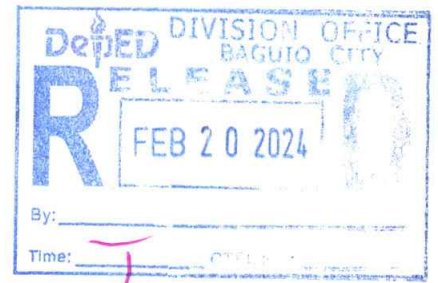




Republic of the Philippines  
**Department of Education**  
Cordillera Administrative Region  
**SCHOOLS DIVISION OF BAGUIO CITY**



February 19, 2024

**DIVISION MEMORANDUM**

No. **104-2024**

**SHARING LOVE, SAVING LIVES PROJECT IMPLEMENTATION**

To: SGOD and CID Chiefs  
Public Schools District Supervisors  
Social Mobilization and Networking Personnel  
Health and Nutrition Section Personnel  
Elementary and Secondary School Heads  
School Parent-Teacher Association Officers  
All others concerned

1. The DepEd SDO Baguio City through the School Governance and Operations Division, Social Mobilization and Networking Section, the Federated Parent-Teacher Association and in partnership with the Baguio General Hospital and Medical Center, have launched the **"Sharing Love, Saving Lives Project (blood typing and bloodletting activities)"** last February 14, 2024. It will be continued on the following dates and schools:

- a. February 20, 2024 – Pines City National High School
- b. March 05, 2024 – Kias Elementary School
- c. March 22, 2024 – Fort Del Pilar Elementary School  
Fort Del Pilar National High School
- d. Other schools (to be scheduled)

2. This project aims to:

- a. provide avenue for learners to understand blood typing and its implications to healthcare;
- b. raise awareness among parents, teachers, other the school community about the noble cause of saving lives through voluntary blood donation; and
- c. mobilize the school community to participate in voluntary blood donation drives.



3. Schools in close proximity like FDPES and FDPNHS may synchronize their schedule and hold the blood typing and bloodletting activities in one venue.





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4. A team of 8-10 blood bank personnel, including medical technologists, nurses, and doctors, will manage the procedures between 9am to 2:45 pm.
5. Participants are advised to be at the venue on time to be accommodated.
6. Learners below 18 years old who will participate in the blood typing activity shall present a signed parent's consent/ waiver to the blood bank personnel. Copies of the waiver shall be made available at the Principal's Office days before the activity.
7. Attached are the layout of the tarpaulin, parent's consent/ waiver, information education and communication (IEC) materials for the activity.
8. School heads and SPTA presidents are advised to communicate with SGOD through the Partnerships and Linkages Focal Person, JULIET D. PIOK at 0917-327-5798.
9. Widest and immediate dissemination of this memorandum is desired.

  
**SORAYA T. FACULO PhD, CESO VI**  
Assistant Schools Division Superintendent  
OIC – Office of the Schools Division Superintendent 





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Attachment 1: Parent's Consent

**To be Completed by the Parent/Guardian**

As the parent/guardian of \_\_\_\_\_, I hereby allow him/her to participate in the following activity:

**Event Title:** Blood Typing in partnership with Baguio General Hospital and Medical Center

**When:** \_\_\_\_\_ | 9:00 am - to 2:45 pm

**Where:** \_\_\_\_\_

As the parent/guardian, I understand my roles and responsibility to explain what is consent form is about to the child and ensure that his/her privacy and identity rights are protected and acknowledged accordingly.

I, \_\_\_\_\_, have legal authority to sign this consent, allowing my daughter/son to attend the said activity mentioned above. I have read this document before signing below and I fully understand the contents, meaning and impact of this consent form.

Parent/Guardian Name: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile Number: \_\_\_\_\_





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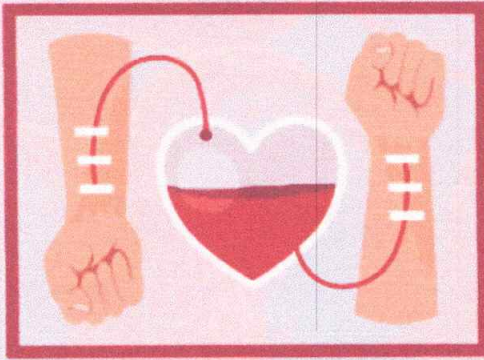
Attachment 2:

Editable tarpaulin (Please change the date, time, and venue before printing)

Link: <http://tinyurl.com/Bloodletting2024>

**DEPARTMENT OF EDUCATION AND  
FEDERATED PARENT-TEACHER ASSOCIATION  
IN PARTNERSHIP WITH  
BAGUIO GENERAL HOSPITAL AND MEDICAL CENTER**

**SHARING LOVE, SAVING LIVES  
PROJECT**



**BLOOD TYPING AND  
BLOODLETTING DAY**


February 20, 2024

**REGISTER NOW!**

**At Pines City National High School  
Grounds**

Open to all learners, parents, teachers,  
and partners.

**MATATAG**  
Mangung-Ambagista | Mangang-Ambagista



Address: 82 Military Cut-off Road, Baguio City  
Telephone/Fax: (074) 442-4326 / (074) 442-7819 | Email: [baguio.city@deped.gov.ph](mailto:baguio.city@deped.gov.ph)  
Website: [www.depedpines.com](http://www.depedpines.com) | Facebook Page: [facebook.com/DepEdTayoBaguioCity](https://facebook.com/DepEdTayoBaguioCity)

"DepEd SDO Baguio City:





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Attachment 3: IEC on Blood Donation



# BLOOD DONATION

### WHY SHOULD YOU DONATE BLOOD?

Blood can not be manufactured artificially. Blood donors are the only source of this life-saving product.



### WHO CAN DONATE BLOOD?

Age: 16-60 years old, must be generally healthy and fit  
 Weight: Atleast 50 kgs (110 lbs)  
 Pulse Rate: 60-100 beats per minute  
 Blood Pressure:  
   Systolic: 90-150mmHg  
   Diastolic: 60-90mmHg  
 Hemoglobin:  
   Males: 135-185 g/L  
   Females: 125- 175 g/L

### STEPS IN BLOOD DONATION

**A. Before Blood Donation**

1. Pre Donation Counseling
2. Vital Signs, Hemoglobin and Blood Typing Taking
3. Physical/Medical Assessment by a Physician

**B. During Blood Donation**

You will be asked to lie on the blood donor's couch. 450 ml of blood will be extracted. This will take less than 15 minutes.

**C. After Blood Donation**

1. Hydrate! Drink plenty of water. No alcohol for 24 hours.
2. Rest. Do not perform heavy lifting or vigorous exercise for 24 hours.

### HOW OFTEN CAN YOU DONATE BLOOD?

You can donate every three months for whole blood donation.

### WHY CANT YOU DONATE BLOOD?

**TEMPORARY DEFERRALS**

Pregnancy  
 Acute Fever  
 Recent Surgery  
 Alcohol Intake 12-24hrs  
 Body Piercing & Tattoo

✦ ✦

**PERMANENT DEFERRALS**

Cancer  
 Cerebrovascular & Cardiac Diseases  
 Severe Lung Disease  
 Hepatitis B & Hepatitis C  
 HIV & other STDs.  
 High Risk Occupations (e.g. prostitution)

### REMINDERS BEFORE DONATING BLOOD

1. Full meal atleast 2-3 hours prior
2. No alcohol intake 24 hours prior
3. At least 6 hours of uninterrupted sleep.
4. No smoking and no chewing of beetlenut at least 6 hours prior.

### CONTACT OR VISIT US:

BLOOD DONORS ROOM, DEPT. OF PATHOLOGY,  
 2ND FLOOR CANCER CENTER,  
 BAGUIO GENERAL HOSPITAL AND MEDICAL CENTER

BGHMC BLOOD BANK

099857139046  
 074-661-7936 LOC 4103-358

bloodbank.bghmc@gmail.com



## BGHMC

Baguio General Hospital  
 Medical Center

