

Parent permission form to perform blood typing in Biology.

We have been studying the genetics of blood, and blood types. In an accompanying lab exercise we are giving students the option of doing a lab where they will determine their own blood type (A,B,O and Rh). We do understand that some parents may not want to allow their children to participate for a variety of reasons, so no student will be pressured into participating. We are aware of concerns about blood-borne diseases and therefore, “Universal Precautions” will be taken.

- Sterile procedure will be followed and students will only work with their own blood.
- Students will not be allowed to be in contact with the blood of other students.
- This will involve drawing a small sample of blood. We will use an Autolet II™ single use lancet designed and sold for diabetic blood sugar testing.
- All used lancets will be immediately discarded in “Sharps” container specifically designed for collecting needles in a medical setting.
- Students will draw and test their blood one at a time, so that they will be properly supervised.
- At the end of the lab all work areas will be cleaned with an appropriate disinfectant.

From past experiences performing this lab with students we can easily say that this is one of the few activities that students of all levels really get into. It is an opportunity to make a science class relate to them personally. If you would rather that your son/daughter not participate in this activity, there will be **no penalty.**¹

Please fill in the name of your son or daughter in **One** of the following lines:

- ✓ I **give my permission** for my son/daughter _____ to perform a lab involving testing his or her blood.
- ✓ I prefer my son/daughter _____ **not** participate in a lab activity involving his or her blood.

Name of Parent or guardian: (Please print) _____

Signature of parent or guardian. _____ Date - _____

¹ For more information/ questions or concerns please feel free to email your child’s teacher.