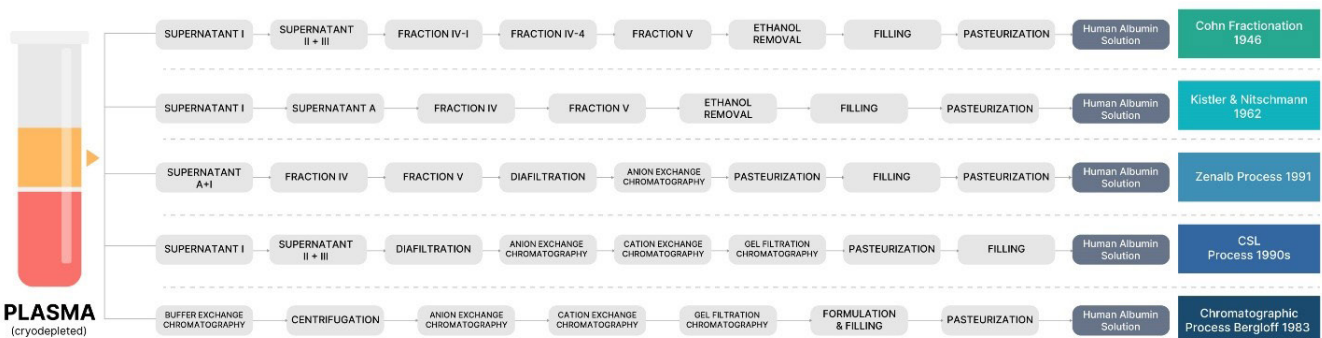


**Table S1** Eligibility and exclusion criteria for plasma donor selection

Donor eligibility	Donor exclusion
Donor must be in good health with unremarkable medical history and physical examination results	Behaviors associated with a transfusion-transmissible infection such as intimate contact with risk of TTI, non-sterile percutaneous inoculation, accidental/intentional exposure to TTI
Donor must be free from transfusion-transmissible infections	Receipt of blood, blood components, treatments, or procedures associated with possible exposure to a transfusion-transmissible infection
Donation cannot adversely affect the health of the donor	Signs or symptoms of a transfusion-transmissible infection
Donation cannot adversely affect the safety, purity, or potency of the blood or blood component	>72 consecutive hours in a correctional institution in the past 12 months
Donor must not be on the deferred donor list for the company or in the National Donor Deferral Registry	Symptoms of recent or current illness; pregnancy within 6 months of donation
The time interval since the last donation is appropriate (every 48 hours but no more frequently than twice weekly)	Certain medical treatments and medications; under the influence of alcohol or drug abuse
The donor is only qualified after making two donations that are acceptable	Travel to or resident of an area endemic to TTI

The details for the table adapted from Simon *et al.* 2020 (1). TTI, transfusion transmitted infection.



**Figure S1** Methods for albumin production from plasma. A flow diagram illustrating the key steps in albumin production from cryodepleted plasma using various purification methods. Adapted from Matejtschuk *et al.*, 2000 (2).

## References

1. Simon TL, Kalina U, Laske R, et al. Manufacturing of plasma-derived C1-inhibitor concentrate for treatment of patients with hereditary angioedema. *Allergy Asthma Proc* 2020;41:99-107.
2. Matejtschuk P, Dash CH, Gascoigne EW. Production of human albumin solution: a continually developing colloid. *Br J Anaesth* 2000;85:887-95.