Blood plasma from people who have recovered from COVID-19 could be a key part of the fight against the disease because it contains antibodies for the new coronavirus. Once the plasma is donated, it can take one of two paths: be directly transfused into patients or used to make a potential plasma-derived medicine.

**DONATION**
Patients who have recovered from COVID-19 donate their blood plasma. This plasma contains antibodies that could help the immune system fight the new coronavirus.

**SCREENING**
Plasma is tested for any transmittable viruses, as well as for compatibility between donor and recipient.

**DIRECT TRANSFUSION**
After the plasma passes screening, it is transfused directly to patients experiencing serious complications from COVID-19. Patient treatment is individualized.

**TRANSFUSION**
Plasma is sent to manufacturing facilities. There, it is pooled, processed to remove other antibodies and inactivate viruses, and purified to create a "hyperimmune globulin" that contains a reliably consistent amount of antibodies.

**PATIENT THERAPY DEVELOPMENT**
Once enough plasma is collected and processed, the potential medicine will go into clinical trials. The trials will study whether it safely and effectively treats people at risk for serious complications from COVID-19.

**EVALUATION / CLINICAL TRIALS**
The efficacy of these transfusions is currently being studied in multiple trials occurring throughout the US.

**EVALUATION / CLINICAL TRIALS**
The trials will study whether it safely and effectively treats people at risk for serious complications from COVID-19.

**APPROVAL**
If regulatory bodies like the US Food and Drug Administration (FDA) and European Medicines Agency (EMA) determine that the potential medicine is both safe and effective, it could be approved to treat patients at risk for serious complications from COVID-19. Companies are also discussing potential use across the world with other national health authorities.

**AVAILABILITY**
If approved, the potential medicines will be ready for use. The timing depends on many factors, but in the best-case scenario, they could be available sometime this year, making them among the earliest approved scalable treatment options. They would serve as a bridge until a vaccine is readily available.