

INSTRUCTOR SHEET
COMPLETION OF REQUEST FOR TRANSFUSION OF BLOOD COMPONENTS

1. Affix BB Identification Number in the appropriate box.
2. Complete the following sections:
 - 2.1 Patient's name.
 - 2.2 Patient's Medical Record Number.
 - 2.3 Date of birth.
 - 2.4 Gender.
 - 2.5 Diagnosis.
 - 2.6 The physician's name.
 - 2.7 ABO/Rh(D) or other antibody history, if known.
 - 2.8 Transfusion History.
 - 2.9 The name(s) of the ordering facility and transfusing facility.
 - 2.10 Date and time of the intended transfusion schedule.
 - 2.11 Date and time of the specimen collection.
3. Print name of the person who collected the sample.
4. Indicate the number of units you are requesting.
5. Check the box next to the blood component you are requesting.
6. Provide laboratory data:

IF REQUESTING:	THEN PROVIDE:
Red blood cell products	Patient's current hemoglobin
Platelet products	Patient's current platelet count

7. Fill out Requested by section with printed name and date.
8. Submit the request with the patient's samples to LifeStream and keep a copy of the request at the Transfusing Facility.