



ROTARY NOIDA BLOOD BANK

(In memory of R'anne Madhu Gupta)

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Mfg. Lic. No.: U.P./B & B.P/2011/05

BLOOD REQUISITION FORM (RNBB-DOC-FORM-BREQ)

Note:- Incomplete & mutilated forms will not accepted, Please turn over & Check (instructions and components usage) before ordering. If overriding give reason.

PATIENT DETAILS

Issue No.:

Patient Name Age Sex

Father's / Husband's Name

Patient's C.R. No. Date of Admission Doctor Incharge

Hospital Name

Clinical Diagnosis

H/o Transfusion with Date Reaction (if any)

Date & Time Request Sent Blood Group(ABO & Rh)

Name & Designation of Requesting Doctor

BLOOD REQUISITION			
<input type="checkbox"/> Routine <input type="checkbox"/> Urgent <input type="checkbox"/> Immediate			
Date & Time of Requirement :			
NO. OF UNITS REQUIRED			
WB		Platelet Concentrate	
PRBC		Platelet Apheresis	
Leucopoor PRBC		Plasma Apheresis	
FFP		Cryoprecipitate	
Paediatric Bag Volume Required :			

Platelet Count : Hb :

TLC : PT/APTT:

Reason for Transfusion :

History of Drug Intake :

IF PATIENT IS FEMALE

History of Pregnancy :

History of HDN, Stillbirth :

Miscarriage :

Reason for Override

Signature with Stamp
(Requesting Doctor)

FOR BLOOD BANK USE ONLY		
Received in Blood Bank By:	Blood Group	Date & Time :

Patient's Blood Grouping & Cell Screening

Anti A	Anti A1	Anti B	Anti AB	Anti H	A1 Cell	A2 Cell	B Cell	O Cell	Auto Control	Anti D1	Anti D2	ABO Rh	Weak D	Cell Screen	
														Cell-1	Cell-2

Blood Component Details

Unit No.	Segment No.	Blood Component	Blood Group	Compatible (Yes/No)

Done By: Signature

Counter Checked By: Signature

(+ Agglutination)

(O No Agglutination)

(P.T.O.)

INSTRUCTION:

1. All request/s for cross matching (compatibility testing) of routine cases should be sent 24 hours in advance.
2. In case of urgent transfusion please indicate the nature of urgency.
3. 5 ml. of patient's blood in plain tube and **5 ML IN EDTA VIAL MUST** be sent with the requisition form.
4. **SAMPLE WILL NOT BE ACCEPTED IN SYRINGES.**
5. In a new born baby up to 6 months of age, send **MOTHER'S BLOOD SAMPLE** also.
6. The requisition form must be completely filled in all respects.
7. Unlabeled, incorrect, incomplete or illegible labelled specimen or those with discrepancy to the requisition form will not be accepted. Sample label also must be signed.
8. A new blood sample of patient is required for cross matching with every fresh requisition.
9. Always make sure the blood or blood components are arranged before undertaking any major surgery.
10. Blood or blood components once issued will not be taken back In blood bank.
11. Requisitions are accepted round the clock.
12. For routine requirement, cross matched blood unit are reserved for 24 hrs from the date of cross match and upto 6 hour for urgent requirement. After the specified period blood unit will be taken back into the inventory and **NO REFUND WILL BE DONE.**

COMPONENTS USAGE-AT A GLANCE

<p>Packed Red blood cells (180-220 ml/bag)</p> <ul style="list-style-type: none"> - Anaemia with hypoxia - Active bleeding with or without hypovolemic Shock. - Syntomatic chronic anaemia unresponsive to conservative therapy. - Hb < 7 grn/dl. - Hb<10 gm/dl in patient who has cardiac. - Pulmonary or neurogenic disease. - Cilnical oxygenation problem at any Hb level. 	<p>Platelet Concentrate (50ml/bag) (Increment in platelet Count in stable adult is 5000-7000/U/bag transfused)</p> <ul style="list-style-type: none"> - Platelet count < 20, 000 / UI (non surgical) - Platelet count < 50, 000/UI with active bleeding - Platelet count < 50,000/ UI and surgery - Consumption coagulopathy - Liver transplant - Massive blood transfusion. * <p>Note: 8 ags ate equal to a single donor apheresis unit.</p>
<p>Fresh Frozen Plasma (150-200 ml/bag)</p> <ul style="list-style-type: none"> - Prothrombin time > 1 1/2 times control. - APTT>55 Sec or > 4 sec of control (Patient for surgery) - Massive blood transfusion. - Coagulation factor deficiency.<25%) - Exchange transfusing. - Liver Transplant. 	<p>Liquid plasma (150-200 ml/bag) For use as volume expander.</p> <ul style="list-style-type: none"> - Extensive surgery. - Massive blood tranfusion with RBC * - Where clotting factors are not required.
<p>Whole blood (350-450 ml/bag)</p> <ul style="list-style-type: none"> - Blood loss > 15% of Blood volume in adults. - 10% of blood volume in children. - Neonatal exchange transfusion. 	<p>Cryo precipitate (10-25 ml/bag)</p> <ul style="list-style-type: none"> - Haemopilia A - Hypofibringenemia
<p>* Massive Transfusion is volume of Blood Transfused in 24 hrs. Equal to total blood volume of patient.</p>	