

BLOOD ADMINISTRATION

010.111.10-19

 I.P. O.P. E.R. Crossmatch Expires At

Date:		Patient's Type
Time From Blood Bank	AM PM	Antibody Screen
Blood Administered By	R.N.	Donor's Number
Blood Administered By	R.N.	Donor's Type
Time Started	AM PM	Blood Recipient Wristband ID
Time Completed	AM PM	
Reaction		<input type="checkbox"/> Packed Cells <input type="checkbox"/> Whole Blood <input type="checkbox"/> Fresh Frozen Plasma <input type="checkbox"/> Platelets
Amount Given		Cross Match

Date Requested

Date and Time To Be Done

Comments

Tech:

Date:

McLAREN THUMB REGION
1100 S. Van Dyke - Bad Axe, MI 48413