Outreach Fax Order Form- Blood Products/Rgts

Deliver to Rice Laboratory Blood Bank ASAP

Fax: (320) 231-4861 Phone: (320) 231-4512 or 1- 800-922-RICE

ORDER FORM- BLOOD COMPONENTS

CUSTOMER	Ordere	ed by:			Date	Date Ordered:			
NAME:	Order received by:				Date Needed:				
	# AND O Pos A Pos B Pos	SFUSE	OF RETU Or An Bn	RNS: neg eg	(CIRCLI RICE SEND DATE	E ONE): COURI	ER RIVER:		
PRODUCT TYPE	0+	A+	B+	AB+	0-	A-	B-	AB-	
LR RBC's									
Platelets								A LANGUAGE CONTRACTOR	
Frozen Plasma									
Cryo Pooled 5pk									
Special Requests: (Irradiated, Antigen typed, etc.)									

If sending samples for Antibody Identification, please fill out and send Antibody Information form.

W		
Filled by:	Date:	
		BAR CODE
		Rice Use Only

REAGENTS/SUPPLIES

H Anti-IgG Cards (rack of 12) Racked Pipet tips (box) H LISS Solution Glass tubes (10x 75 mm) Transfer pipettes (box)	
Glass tubes (10x 75 mm)	
Glass tubes (10x 75 mm)	
Transfer pipettes (box)	
Hematype Segment Device (Box of 500)	
The Doctority Dags	
	f 500) hlebotomy Bags

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