

LIFESHARE BLOOD CENTERS

***Hospital Blood Inventory / Blood Product Order**

Hospital: _____ Date: _____ Time: _____

Hospital Rep: _____ Rec'd By (LBC Rep.): _____

Leukoreduced Red Cell Inventory

	O+	A+	B+	AB+	O-	A-	B-	AB-
Stock								
X-Matched								

Any Returns? Yes No

BLOOD PRODUCT ORDER:

	O+	A+	B+	AB+	O-	A-	B-	AB-
Leukoreduced RBC's								
PTP								

	Standard Volume				Jumbo			
	O	A	B	AB	O	A	B	AB
FFP								
Cryoreduced FFP								

Cryo: _____

Special Requirements: _____

BLOOD DERIVATIVE ORDER:

Time Needed: _____ Stock (Send today)

***Fax to LifeShare Blood Centers:** Fax # (318) 673-1544 – Shreveport
 (318) 445-7548 – Alexandria
 (318) 322-5890 – Monroe
 (409) 835-6862 – Beaumont
 (337) 494-1565 – Lake Charles
 (225) 383-1164 – Baton Rouge

LBC Staff:

Completed By: _____ Date/Time: _____

**Instructions to Hospital Staff for Completion of Form S-76
“Hospital Blood Inventory / Blood Product Order”**

A. Complete information on Form S-76:

1. Name of faxing/ordering facility.
2. Date inventory taken/order placed.
3. Time inventory taken/order placed.
4. Identity of person performing inventory/placing order.
5. Facility’s leukoreduced red cell inventory. List stock units and crossmatched units in designated areas.
6. Returns: Check “Yes” if facility has units to return, “No” if there are no units for return.
7. Complete Blood Product Order:

Leukoreduced Red Cells: Enter number of units of each ABO blood type needed in designated.

PTP: Enter number of Platelet Apheresis units of each ABO blood type needed in designated space.

FFP: Enter number of units of each ABO blood type needed in designated spaces under Standard Volume or Jumbo units.

Cryoreduced FFP: Enter number of units of each ABO blood type needed in designated space.

Cryo: Enter number of units needed in designated space.

8. Special Requirements: Enter any special needs relating to ordered products, i.e., baby units, CMV neg, sample prep.
9. Enter derivative product order. List product name and quantity.
10. Priority status: Indicate time stock order is needed.

B. Fax completed Form S-76 to LBC Service Center:

Fax Numbers are:	Shreveport	(318) 673-1544
	Alexandria	(318) 445-7548
	Monroe	(318) 322-5890
	Beaumont	(409) 835-6862
	Lake Charles	(337) 494-1565
	Baton Rouge	(225) 383-1164