

Blood Bank Information: 01/07/2018 to 31/12/2018 Form – A

A) Blood Bank Details

| Blood Bank Name and Address | SBTC ID | District | Category | License No. & Validity | Name of Blood Bank Incharge | No. of Complaints Received |
|--|---------|----------|----------|------------------------|-----------------------------|----------------------------|
| Kohinoor city, Kirol road, Off L.B.S.Marg,Kurla (W), Pin-400 070 | Bb341 | Mumbai | Private | MH004688 13/12/2020 | Dr. Nilam Jadhav | 0 |

B) Numbers of Staff Working

| Blood Transfusion Officer (B.T.O.) | Technical Supervisor | Technician | MSW/PRO | Staff Nurse |
|------------------------------------|----------------------|------------|---------|-------------|
| 01 | 02 | 03 | 01 | 01 |

C) Blood Collection and Utilisation (01/07/2018 to 31/12/2018)

| Total Blood Collection | | | | Total Blood Utilisation | | | | |
|------------------------|-----------|-------------|-------|-------------------------|----------------------------|-----------|-----|------|
| No. of Camps | Voluntary | Replacement | Total | Whole Blood | RBC | Platelets | FFP | CRYO |
| 05 | 415 | 0 | 415 | 03 | 542+ 10 <i>Transfer</i> | 116 | 410 | 0 |

D) Bulk Transfer of Blood Units

| Whole Blood & Component | Whole Blood | RBC | Platelets | FFP | CRYO |
|---------------------------------------|-------------|-----|-----------|-----|------|
| Units received from other blood bank | 0 | 142 | 0 | 0 | 0 |
| Units transferred to other blood bank | 0 | 10 | 0 | 0 | 0 |

E) Blood Units Discard on account of (Only WB & RBC)

| TTD +ve | Expired | Hemolysed | Other | Total |
|---------|---------|-----------|-------|-------|
| 05 | 04 | 0 | 07 | 16 |

Nilam Jadhav
Incharge Blood Bank
(Signature & Stamp)



Please send information in scanned pdf format with Sign & Stamp of B.B.Incharge onsbtc@mahasbtc.com (Please verify before sending the Information)

Processing and Additional testing charges for Blood and Blood Component Form – B

| | | | | | | | |
|--------------------|------------------------------|---------|-------|----------|--------|----------|---------|
| Name of Blood Bank | Kohinoor Hospital Blood Bank | SBTC ID | Bb341 | District | Mumbai | Category | Private |
|--------------------|------------------------------|---------|-------|----------|--------|----------|---------|

A) Processing charges (Basic) in Rs.

| | | | | | |
|-------------|------|-----------|-----|------|-------|
| Whole Blood | RBC | Platelets | FFP | CRYO | SDP |
| 1450 | 1450 | 400 | 400 | 250 | 11000 |

B) Charges of specialized test per Whole Blood unit in Rs.

| NAT | Chemiluminescence | IV Generation Elisa | | | Anti HBc | Antibody screening (Donor) |
|-----|-------------------|---------------------|--------|-----|----------|----------------------------|
| | | HIV | HBs Ag | HCV | | |
| No | No | 50 | No | No | No | No |

C) Charges of specialized Component specific test in Rs.

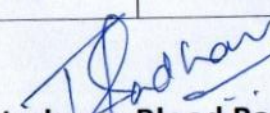
| Leuco filtration | | Blood Grouping and Cross Matching | | | Phenotyping for extended Serology | Irradiation | Bacterial Detection |
|------------------|-----------|-----------------------------------|-----------------|---------------|-----------------------------------|-------------|---------------------|
| Red Cells | Platelets | Automation | Semi Automation | Both together | | | |
| No | No | No | No | No | No | No | No |

D) Additional processing charges for Blood components using Quadruple bags by buffy coat method in Rs.

| | | |
|-----------|-----------|--------|
| Red Cells | Platelets | Plasma |
| No | No | No |

E) Additional processing charges for Blood components using Quadruple bags by buffy coat method in Rs.

| | | | | | |
|-------------|-----|-----------|-----|------|-----|
| Whole Blood | RBC | Platelets | FFP | CRYO | SDP |
| No | No | No | No | No | No |


 Incharge Blood Bank
 (Signature & Stamp)

