

Blood Bank Information: 01/01/2019 to 30/06/2019

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
Civil Surgeon, General Hospital, Blood Bank Washim	bb 328	WASHIM	Govt	Amd/bb/29 2009	Dr. K.A. Lonkar	00

B) Numbers of Staff Working

Blood Transfusion Officer (B.T.O.)	Technical Supervisor	Technician	MSW/PRO	Staff Nurse
02	01	04	01	01

C) Blood Collection and Utilisation (01/01/2019 to 30/06/2019)

Total Blood Collection				Total Blood Utilisation				
No. of Camps	Voluntary	Replacement	Total	Whole Blood	RBC	Platelets	FFP	CRYO
28	1234	-	1234	1156	-	-	-	-


D) Bulk Transfer of Blood Units

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

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

TTD +ve	Expired	Hemolysed	Other	Total
27	10	-	25	62




 Incharge Blood Bank
 (Signature & Stamp)
 I/C Blood Bank

District General Hospital, Washim

Please send information in scanned pdf format with Sign & Stamp of B.B. Incharge on sbtc@mahasbtc.com (Please Verify before sending information)

Processing and Additional testing charges for Blood and Blood Component

Form - B

Name of Blood Bank	Civil Surgeon-General Hospital Blood Bank - Washim	SBTC ID	bb328	District	Washim	Category	Govt.
--------------------	--	---------	-------	----------	--------	----------	-------

A) Processing charges (Basic) in Rs.

Whole Blood	RBC	Platelets	FFP	CRYO	SDP
450	450	450	450	-	-

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

NAT	Chemiluminscence	IV Generation Elisa			Anti HBc	Antibody screening (Donor)
		HIV	HBs Ag	HCV		
-	-	-	-	-	-	-

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			
-	-	-	-	-	-	-	-

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

Red Cells	Platelets	Plasma
-	-	-

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

Whole Blood	RBC	Platelets	FFP	CRYO	SDP
-	-	-	-	-	-




**Incharge Blood Bank
(Signature & Stamp)**

Please send information in scanned pdf format with Sign & Stamp of B.B. Incharge on sbte@mahasbtc.com (Please verify details regarding the Information)
District General Hospital, Washim