

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 |
|--|---------|----------|----------|-------------------------|-----------------------------|----------------------------|
| SIR H.N. HOSPITAL RESEARCH CENTER BLOOD BANK | bb 193 | MUMBAI | TRUST | 28-C-1075 20/10/2019 | DR JOYCE Regi | — |

B) Numbers of Staff Working

| Blood Transfusion Officer (B.T.O.) | Technical Supervisor | Technician | MSW/PRO | Staff Nurse |
|------------------------------------|----------------------|------------|---------|-------------|
| 03 | 02 | 07 | 01 | 02 |

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 |
| 12 | 2051 | — | 2051 | 0 | 2159 | 1339 | 1193 | 561 |

D) Bulk Transfer of Blood Units

| Whole Blood & Component | Whole Blood | RBC | Platelets | FFP | CRYO |
|---------------------------------------|-------------|-----|-----------|-----|------|
| Units received from other blood bank | 0 | 74 | 132 | 0 | 0 |
| Units transferred to other blood bank | 0 | 50 | 71 | 04 | 0 |

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

| TTD +ve | Expired | Hemolysed | Other | Total |
|---------|---------|-----------|-------|-------|
| 36 | 0 | 0 | 8 | 44 |

Sir HN Hospital and Research Centre Blood-Lic. No. 1075
 3rd Floor, Kapole Niwas, Padmashri Gordanbappa Chowk,
 Raja Ram Mohan Roy Rd.,
 Mumbai-400 004

Incharge Blood Bank
 (Signature & Stamp)

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

Processing and Additional testing charges for Blood and Blood Component

Form - B

| | | | | | | | |
|--------------------|-----------------------------|---------|--------|----------|--------|----------|-------|
| Name of Blood Bank | SIR H.N.HOS R.C. BLOOD BANK | SBTC ID | bb 193 | District | MUMBAI | Category | TRUST |
|--------------------|-----------------------------|---------|--------|----------|--------|----------|-------|

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 | | |
| 1200 | 500 | — | — | — | — | 300 |

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 | | | |
| 1000 | 1500 | — | — | 280 | — | 1000 | — |

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

| Red Cells | Platelets | Plasma |
|-----------|-----------|--------|
| 150 | 150 | 150 |

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

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

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