

Blood Bank Information: 01/01/2018 to 30/06/2018

8 : 0323-2318020
CIVIL HOSPITAL, NASHIK
METRO BLOOD BANK

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
Metro Blood Bank Civil Hospital Nashik	bb-128	Nashik	Gov.	NKD-992 13/12/2020	Dr. Pratibha Pagar	0

B) Numbers of Staff Working

Blood Transfusion Officer (B.T.O.)	Technical Supervisor	Technician	MSW/PRO	Staff Nurse
1 (Reg) + 1 (con) = 02	01 (con)	4 (Reg) + 3 (con) = 7	1 (con)*	1 (Reg)

* 1 Councillor from MSACs [con]

C) Blood Collection and Utilisation (01/01/2018 to 30/06/2018)

Total Blood Collection				Total Blood Utilisation				
No. of Camps	Voluntary	Replacement	Total	Whole Blood	RBC	Platelets	FFP	CRYO
74	334g	0	334g	1530	1987	0	2013*	0

* 1098 Issued to Reliance for fractionation.

D) Bulk Transfer of Blood Units

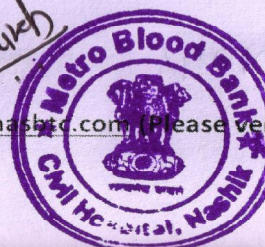
Whole Blood & Component	Whole Blood	RBC	Platelets	FFP	CRYO
Units received from other blood bank	243	74	0	0	0
Units transferred to other blood bank	56	0	0	0	0

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

TTD +ve	Expired	Hemolysed	Other	Total
35	0	0	19	54

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

Pratibha



Incharge Blood Bank
(Signature & Stamp)

METRO BLOOD BANK
Civil Hospital, Nashik
☎ : 0253-2318020

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

Name of Blood Bank	Metro Blood Bank Nashik	SBTC ID	bb 128	District	Nashik	Category	Govt.
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A) Processing charges (Basic) in Rs.

Whole Blood	RBC	Platelets	FFP	CRYO	SDP
As per शासन निर्णय, क्रमांक : सकवि 2013 / प्र.क्र. 462 / भाग-2 / अरोख 3, दिनांक 28/12/2015					

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		
_____	_____	NOT- APPLICABLE			_____	_____

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			
_____	_____	NOT- APPLICABLE			_____	_____	_____

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

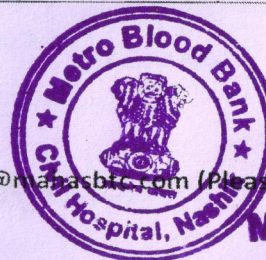
Red Cells	Platelets	Plasma
_____ NOT- APPLICABLE _____		

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

Whole Blood	RBC	Platelets	FFP	CRYO	SDP
_____ NOT- APPLICABLE _____					

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[Signature]



Incharge Blood Bank
(Signature & Stamp)

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