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 Hosp. Patrakar chowik	bb\35	Ahmednag	Gort	31/12/2022	Dr. Whan s.	

B) Numbers of Staff Working

Blood Transfusion Officer (B.T.O.)	Technical Supervisor	Technician	MSW/PRO	Staff Nurse
02	01	02	0)	•

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
56	3,138	,-	3,138	1341	1797	27	218	-

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
46	82	-	13	14)

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)

Name of Blood Bank Civil Hospital	SBTC ID	bb 135	District	Ahnydhagar	Category	Gout.
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A) Processing charges (Basic) in Rs.

Whole Blood	RBC	Platelets	FFP	CRYO	SDP
850/-	-850/-	300/-	. 300/-	- :	. –

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

NAT	Chemiluminscence	IV Generation Elisa					
	Chemiuminiscence	HIV	HBs Ag	HCV	Anti HBc	Antibody screening (Dono	
-		-		_			

C) Charges of specialized Component specific test in Rs.

Leuco filtration		tion Blood Grouping and Cross Matching Phe		Phenotyping		MANON MANON MANON	
Red Cells	Platelets	Automation	Semi Automation	Both together	for extended Serology	Irradiation	Bacterial Detection
	-	-	-	-		_	

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 hags by huffy cost method in De

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 <a href="mailto:state-on-st