

Government of South Australia



Factor IX / Anti-Haemophiliac Factor Details To be completed from the product label upon receipt					Patient Details To be completed when product is received or issued			Product Fate To be completed anytime product is REMOVED from or RETURNED to fridge.										
Date		Product Name			Surname		Issue	Date	Time	Ward	Fat	e Coo	le (Cir	cle)		Sign and Print Name		
Time	Expiry				First Name		1				RTS R	TFI	DAM	EXP	IS			
Path Lab (Circle)	SA Path	Abbott	AustClinLabs	Clinpath	DOB						RTS R	TFI	DAM	EXP	IS			
Batch Number			Dose/Size		MRN		2				RTS R	TF I	DAM	EXP	IS			
Print and Sign	and Sign					eft Blank Intentionally	2				RTS R	TFI	DAM	EXP	IS			
Date	Product Name				Surname			Date	Time	Ward	Fat	e Coo	de (Cir	cle)		Sign and Print Name		
Time		Expiry			First Name						RTS R	TFI	DAM	EXP	IS			
Path Lab (Circle)	SA Path	Abbott	AustClinLabs	Clinpath	DOB		1				RTS R	TFI	DAM	EXP	IS			
Batch Number			Dose/Size		MRN		2				RTS R	TFI	DAM	EXP	IS			
Print and Sign						eft Blank Intentionally	Z				RTS R	TFI	DAM	EXP	IS			
Date		Product Name			Surname			Date	Time	Ward	Fat	e Coo	de (Cir	cle)		Sign and Print Name		
Time		Expiry			First Name		1				RTS R	TF I	DAM	EXP	IS			
Path Lab (Circle)	SA Path	Abbott	AustClinLabs	Clinpath	DOB						RTS R	TF I	DAM	EXP	IS			
Batch Number			Dose/Size		MRN		2				RTS R	TF I	DAM	EXP	IS			
Print and Sign					Left Blank Intentionally						RTS R	TFI	DAM	EXP	IS			
Date	Product Name				Surname			Date	Time	Ward	Fat	e Coo	le (Cir	cle)		Sign and Print Name		
Time	Expiry				First Name						RTS R	TF I	DAM	EXP	IS			
Path Lab (Circle)	SA Path	Abbott	AustClinLabs	Clinpath	DOB		1				RTS R	TFI	DAM	EXP	IS			
Batch Number			Dose/Size		MRN						RTS R	TFI	MAC	EXP	IS			
Print and Sign						eft Blank Intentionally	2				RTS R	TFI	DAM	EXP	IS			
Problem Log: incident number.		e Code: Ward: Enter ward name / number, RTS: Return to Supplier, RTF: Return to Ige, DAM: Damaged, EXP: Expired, IS: Incorrect Storage																
	Factor IX, Thrombotrol and Factor VIII must be stored at 2°C - 6 °C in an approved blood fridge or vaccine fridge. Refer to manufacturers' storage												Hospital Quality Delegate Review					
	instructions as some products may be kept at room temperature for a period of time. Contact your Transfusion Service Laboratory thre months prior to expiry for stock rotation.											Site Name:						
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Factor IX (id	Factor IX (ie. Monofix/Benefix) / Anti-Haemophiliac Factor (ie. AHF, Factor VIII) Thrombotrol																	
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South Australian Pub	outh Australian Public Hospitals Retention Disposal Schedule require this form to be archived and stored for 20 years by the health unit											Contact No:						