

Cryoprecipitate Pack Details <small>To be completed from the blood pack label upon receipt Do NOT Refrigerate</small>										Patient Details <small>To be completed from the blood compatibility label upon receipt</small>				iesria	Product Fate <small>To be completed anytime product is REMOVED from or RETURNED to fridge.</small>									
Date		Temp		Expiry		Pt Blood Group					Date	Time	Ward	Fate Code (circle)					Sign & Print Surname					
Time		Donor Group				Surname					1				RTS	RTF	DAM	EXP	IS					
Path Lab (Circle)	SA Path	Abbott		AustClinLabs		Clinpath		First Name			2				RTS	RTF	DAM	EXP	IS					
Donor Number								DOB							RTS	RTF	DAM	EXP	IS					
Print and Sign								MRN							RTS	RTF	DAM	EXP	IS					
Date		Temp		Expiry		Pt Blood Group					Date	Time	Ward	Fate Code (circle)					Sign & Print Surname					
Time		Donor Group				Surname					1				RTS	RTF	DAM	EXP	IS					
Path Lab (Circle)	SA Path	Abbott		AustClinLabs		Clinpath		First Name			2				RTS	RTF	DAM	EXP	IS					
Donor Number								DOB							RTS	RTF	DAM	EXP	IS					
Print and Sign								MRN							RTS	RTF	DAM	EXP	IS					
Date		Temp		Expiry		Pt Blood Group					Date	Time	Ward	Fate Code (circle)					Sign & Print Surname					
Time		Donor Group				Surname					1				RTS	RTF	DAM	EXP	IS					
Path Lab (Circle)	SA Path	Abbott		AustClinLabs		Clinpath		First Name			2				RTS	RTF	DAM	EXP	IS					
Donor Number								DOB							RTS	RTF	DAM	EXP	IS					
Print and Sign								MRN							RTS	RTF	DAM	EXP	IS					
Date		Temp		Expiry		Pt Blood Group					Date	Time	Ward	Fate Code (circle)					Sign & Print Surname					
Time		Donor Group				Surname					1				RTS	RTF	DAM	EXP	IS					
Path Lab (Circle)	SA Path	Abbott		AustClinLabs		Clinpath		First Name			2				RTS	RTF	DAM	EXP	IS					
Donor Number								DOB							RTS	RTF	DAM	EXP	IS					
Print and Sign								MRN							RTS	RTF	DAM	EXP	IS					
Date		Temp		Expiry		Pt Blood Group					Date	Time	Ward	Fate Code (circle)					Sign & Print Surname					
Time		Donor Group				Surname					1				RTS	RTF	DAM	EXP	IS					
Path Lab (Circle)	SA Path	Abbott		AustClinLabs		Clinpath		First Name			2				RTS	RTF	DAM	EXP	IS					
Donor Number								DOB							RTS	RTF	DAM	EXP	IS					
Print and Sign								MRN							RTS	RTF	DAM	EXP	IS					

Problem Log: Record all problems. Must include dates, corrective actions and incident number on reverse of this page. Problem logged () tick, see details over page.

Fate Code: **Ward:** Enter ward name / number, **RTS:** Return to Supplier, **RTF:** Return to Fridge, **DAM:** Damaged, **EXP:** Expired, **IS:** Incorrect Storage

Cryoprecipitate should be used immediately. Thawed cryoprecipitate should be maintained at 20°-24°C until transfused. Contact Transfusion Service Laboratory if unable to be used. **Do NOT Refrigerate**

Cryoprecipitate

South Australian Public Hospitals Retention Disposal Schedule require this form to be archived and stored for 20 years by the health unit

Hospital Quality Delegate Review

Site Name: _____

Print Name: _____

Sign: _____ Designation: _____

Contact No: _____