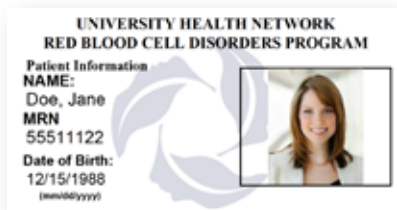


Documents required for blood collection at Life Labs

- UHN Photo ID



- UHN Name ID Labels
- Two specimen tubes
- Transfusion appointment date
- Blood bank requisition (Filled by MSDU RN)

Questions, Suggestions Contact

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Red Blood Cell Disorders Program

Blood Collection at
LifeLabs for your
Cross-Match at UHN

Previous Record / Special Instructions Initials: _____

| TIME NO. | DONOR | | | COMPATIBILITY TEST'S | | | | | | TYPING | ISSUE | |
|----------|-------------|------|-------|----------------------|----|-----|--------|----|-----|--------|------------|-----------|
| | UNIT NUMBER | DATE | GROUP | SET UP | IN | OUT | SET UP | IN | OUT | | REMOVED BY | DATE/TIME |
| | | | | | | | | | | | | |

SIGN HERE

UNIVERSITY HEALTH NETWORK, LABORATORY MEDICINE PROGRAM, BLOOD TRANSFUSION

Electronic requisitions not correctly labeled or signed will not be processed
 Sign Doctor (Please Print) _____ Blood specimen drawn by _____
 Signature _____
 Print Surname _____
 Date/Time _____
 Physician's Signature _____ Date & Time _____

RELEASE UNMATCHED BLOOD _____
 I have checked that the serum, and the hospital identification number on the requisition, and on the blood container labeled in the patient's presence matches the patient's UHN Red Blood Cell Disorders Clinic Print ID card. SEND REPORT TO (NMT): _____

REQUIRE TO LABORATORY For urgent cases, please laboratory of time basis (Time entry print basis)
 Blood group and antibody screen
 Blood group confirmation (see per ICT Medical Director)
 Crossmatch blood _____ units
 Request for _____ Size _____ Time _____ Location _____
 Other blood products (specify product and quantity) _____ units of _____
 Antibody Investigation
 Direct Antiglobulin Test
 Cold Agglutinin Screen
 Transfusion reaction investigation (complete back of requisition)
 Other _____

PREVIOUS HISTORY (Please Complete) Previous Identification Number _____
 Frequency: Day, Night, Date _____
 REPORT LAB USE ONLY LABORATORY NO. _____
 Patient's blood group (RBC) _____ Type _____
 _____ units of unmatched blood available unit:
 _____ (24 hours post-up or 48 hours outlay)
 CANCELLATION DATE: _____
 Clear/hydrolyzed antibodies present, None
 Yes, Not _____

Time Rec'd _____
 FAX _____
 Sent _____
 Received _____

Red Blood Cell Disorder Crossmatch Pilot

44-2344-1046/04/04 Rev 2002 LOCATION OF BTL TSN 200-200 TRN 071-200 Patient ID (Previous Labels Below ID not 2002)



The Red Blood Cell Disorders Pilot Project was designed to demonstrate how patients can reduce time spent at the Medical Surgical Day Unit for transfusion by having their cross-match specimen drawn at a *LifeLabs* patient centre in advance of their visit to the hospital.

The Pilot demonstrated the following:

- Reduction in total transfusion time
- Specific transfusion appointments can be provided
- Improved patient satisfaction

Who is likely to benefit from Community Cross-match collection?

- Patients who would like to reduce the time spent at UHN for Blood Transfusion
- Patients who live close to a designated *LifeLabs* Patient Centre with convenient hours

What are your responsibilities?

- Book your appointments for blood collection with *LifeLabs* to avoid processing delays
- *LifeLabs* appointments can be booked online at: www.lifelabs.com/Lifelabs_ON/ or by calling 1-877-849-3637
- Present your UHN Blood band requisition to *LifeLabs*
- Present your UHN issued ID
- Ensure that your specimen tubes remain at room temperature
- Do not make changes to transfusion appointment after blood has been drawn

Ideal Blood collection day for Transfusion day

| Scheduled Day of Transfusion | Day of the week to visit <i>LifeLabs</i> |
|------------------------------|--|
| Monday | <ul style="list-style-type: none"> • Friday • Saturday |
| Tuesday | <ul style="list-style-type: none"> • Saturday • Monday before noon |
| Wednesday | <ul style="list-style-type: none"> • Monday • Tuesday before noon |
| Thursday | <ul style="list-style-type: none"> • Monday • Tuesday • Wednesday before noon |
| Friday | <ul style="list-style-type: none"> • Tuesday • Wednesday • Thursday before noon |

If you live close to one of the proposed *LifeLab* sites below you may consider participation in this project

| City | Address | Hours of Operation |
|-------------|--|--|
| Mississauga | 2300 Eglinton Avenue West L5M 2V8 | Mon. to Fri. 7am–3pm Sat. 8am–12pm Holiday Weekends Closed Sun. Closed |
| Markham | 379 Church St. Suite 111 L6B 0T1 | Mon. to Fri. 7:30am–4pm Holiday Weekends Closed Sat/Sun. Closed |

If you live close to one of the proposed *LifeLab* sites below you may consider participation in this project

| City | Address | Hours of Operation |
|--------------------|--|--|
| Oshawa | 245 King Street West L1J 2J7 | Mon. to Fri. 7am–3pm Sat. 7am–12pm Holiday Weekends Closed Sun. Closed |
| Richmond Hill | 250 Harding Boulevard B03 L4C 9M7 | Mon. to Fri. 7:30am–3:30pm Holiday Weekends Closed Sat. 7am–2pm |
| Scarborough | 1371 Neilson Road Suite 111 M1B 4Z8 | Mon. to Fri. 7:30am–4pm Holiday Weekends Closed Sat. 8am–1pm |
| Toronto North York | 1333 Sheppard Avenue, East Suite 149 M2J 1V1 | Mon. to Fri. 7:30am–5pm Holiday Weekends Closed Sat. 8am–12pm |
| Woodbridge | 8077 Islington Avenue Suite 108 L4L 7X7 | Mon. to Fri. 7am–4pm Holiday Weekends Closed Sat. 8am–12pm |