Olivizion -	DONOR CENTER TECHNICAL GUIDE			
Institute D.C. Procedure Manual Dted October 6, 1976	REVISION NO.	January 18, 1977	rage 1 of 2	No. 100.1.2
WHOLE BLOOD AND PLASMA PR	OCESSING LOG	RFS	GRO-0	

PURPOSE

To establish the instructions for the proper documentation of the Whole Blood and Plasma Processing Log (HY-2290).

SCOPE

Provisions of this instruction apply to all Hyland plasma centers.

INSTRUCTIONS

- 1. Documented information is to read as follows:
 - a. Location: Name of city or town in which the plasma center is located.
 - b. Date: Month, day and year to be recorded.
 - c. Pooling Bottle Lot Number: Lot number of sterile pooling bottles to be used.
 - d. Lot No. Change(indicate by *): Lot number of sterile pooling bottle in case of lot number change. The asterisk (*) is to be placed prior to the bleeding number column.
 - e. Plasma Transfer Set Lot No.: Lot number of plasma transfer sets to be used.
 - f. Lot No. Change (indicate by **): Lot number of plasma transfer sets in case of lot number change. The double asterisk (**) is to be placed prior to the bleeding number column.
 - g. Bleeding No.: Donor's bleeding number is to be labeled in or written.
 - h. <u>VIf over 175 lbs.</u>: A check mark is to be used in this column for those donors weighing 175 lbs. and over.
 - i. Bleeding Bag Weight (GMS): Blood pack No. 1 and 2 gram weight. Initials of person(s) weighing blood packs.
 - J. Centrifuged by: Initials of person(s) centrifugating blood packs.
 - k. Pooled by: Initials of person(s) extracting plasma from blood packs to sterile pooling bottle.

Company Olvision	DIVISION TRAVENOL LABORATORIES, INC			DONOR CENTER TECHNICAL GUIDE		
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WHOLE BLOOD AND PLASMA PRO	OCESSING LOG		RFS	APPROVED	AL PROCUREMENT	

- 1. Labeled by: Initials of the person labeling the sterile pooling bottle.
- m. <u>Comments</u>: This section reserved for any comments in case of corrective action to be taken in the processing procedure, such as overbleeds, contamination of plasma by red cells, etc.
- n. Daily Accuracy Check of Speed and Temperature of Centrifuges: Initials of persons(s) and time indicated as to when Sorvall centrifuges (RC-3) were observed for correct speed and temperature. If any deviations from the correct speed and temperature are noted, this is to be indicated in the
- o. Plasma Scale Calibrated: Indicate the gram weight used in the calibration of the scale. It is recommended that a gram weight of 600 be used. Refer to Technical Guide Procedure 70.4 for proper taring of the plasma scale. Initials of the person(s) calibrating the scale are to be written
- P. Whole Blood Scale Calibrated with the Following Gram Weights: It is recommended that gram weights of 610 and 720 grams be used.

STATE THE TANK OF ANHALT REPORT AND LIVE BROOK AND LIVE BONK LIVE BONK FOR Lot No. Change (indicate by *) _Pooling Bottle Lot Number __ LOCATION: Lot No. Change (indicate by **) Plasma Transfer Set Lot No. ... BLEEDING BAG WEIGHT (GMS) CENTRIFUGED POOLED LABEL BY BY COMMENTS SLEEDING NO. BY NO. 1 INT. NO. 2 INT. NO. 2 NO. 1 NO. 2 NO. 1 DAILY ACCURACY CHECK OF SPEED AND TEMPERATURE OF CENTRIFUGES _ Time: __ NOTE: All centrifuges observed at 5,000 rpm, 5°C unless otherwise stated Initial: CENTRIFUGE SPEED (ipm's) TEMPERATURE INITIAL TEMPERATURE INITIAL CENTRIFUGE SPEED (ipm's)

Plasma scale calibrated: ______ Initial ____

HY-2290 (5-76)

Plasma scale calibrated: Initial					
Whole blood scale calibrated with following gram weight	s gms	gms In	itial ————		
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