



# Inventory Report & Order Form

## Uncrossmatched

RBC	O+	A+	B+	AB+	O-	A-	B-	AB-
<b>TOTAL</b>								
<b>SHORT</b>								
L/R RBC	O+	A+	B+	AB+	O-	A-	B-	AB-
<b>TOTAL</b>								
<b>SHORT</b>								

Hospital:	
Employee:	
Date:	
Time:	

\* 6 or more units to same patient in < 24 hrs.

*Excess Usage (1)	
ABO/Rh:	
Quantity:	
Product:	
Diagnosis:	
*Excess Usage (2)	
ABO/Rh:	
Quantity:	
Product:	
Diagnosis:	

## Crossmatched

None

RBC	O+	A+	B+	AB+	O-	A-	B-	AB-
<b>TOTAL</b>								
<b>SHORT</b>								
L/R RBC	O+	A+	B+	AB+	O-	A-	B-	AB-
<b>TOTAL</b>								
<b>SHORT</b>								

Platelets In-House		
Out Date	Apheresis	Random
Today		
Tomorrow		
3 Days		
4 Days		

Yesterday's Platelet Usage		
	Apheresis	Random
<b>TOTAL</b>		

Yesterday's Pooled Cryo Usage	
<b>TOTAL</b>	

## Yesterday's Red Cell Usage

None

Product	O+	A+	B+	AB+	O-	A-	B-	AB-
RBC								
L/R RBC								

## TOTAL Ideal Inventory Levels

(Uncrossmatched + Crossmatched)

Product	O+	A+	B+	AB+	O-	A-	B-	AB-
RBC								
L/R RBC								

## Today's Shelf Order

None

Product	O+	A+	B+	AB+	O-	A-	B-	AB-
RBC								
L/R RBC								
Irradiated L/R RBC								
Random Platelets								
Apheresis Platelets								
FFP								
Cryoprecipitate								
Pooled Cryo								

Notes/Comments

Please Forward  
to CBC by  
**9:00 a.m. EST**  
E-mail: [blood@cbccts.org](mailto:blood@cbccts.org)  
Fax: 937/461-9972  
Call: 937/461-7557