

* Forms for hospital use are highlighted and are available on-line at www.cbcts.org.

SECTION 1 - INTRODUCTION		
Document Number	Version	Document Title
CSM-010-POL	2.0	CBC/CTS Customer Service Manual (policy)
CSM-010-WI-01	2.0	CBC/CTS Customer Service Manual Update
CSM-010-WI-02	2.0	Accessing CSM Hospital Forms From Website
CSM-010-WI-03	2.0	Hospital Instructions for Obtaining a Circular of Information (COI)
CSM-010-JA-01	2.0	QUICK PHONE REFERENCE (located in front of section and TOC)
CSM-010-JA-02	3.0	CBC/CTS Contact Information
CSM-010-JA-03	2.0	CBC/CTS Document Guidelines
SECTION 2 - HOSPITAL SERVICES		
CSM-020-JA-01	00	QUICK REFERENCE for Blood Product Order and Return
HS-200-WI-03	3.0	Hospital Instructions - Inventory Report and Order Form
HS-200-JA-06	5.0	Round Trip Considerations
HS-200-F-04	3.0	Inventory Report and Order Form
HS-300-WI-04	00	Hospital Instructions - Blood Component Shipment
HS-300-WI-05	2.0	Hospital Instructions - Use of Product Return/Transfer Report
HS-300-JA-01	2.0	Packing Specifications
HS-300-JA-02	3.0	Shipping Refrigerant Guide
HS-300-F-01	3.0	Product Return/Transfer Report
HS-307-POL	2.0	Shipment of Unlicensed Blood Products Across Ohio State Line
HS-308-WI-02	00	Manual Packing Slip Instructions During Computer Downtime
HS-308-F-01	00	Blood Components Manual Packing Slip (CBC completes form)
HS-328-JA-01	4.0	Logging into Blood Hub
HS-328-JA-02	2.0	Ordering Standard Products in Blood Hub
HS-328-JA-03	2.0	Ordering Antigen Screened Units Using Blood Hub
HS-328-JA-04	2.0	Requesting Services Using Blood Hub
HS-328-JA-05	2.0	Ordering using a Template in Blood Hub
HS-328-JA-06	00	Managing Orders and Dashboard in Blood Hub

SECTION 3 LAB SERVICES – REF - HLA		
CSM-030-JA-01	00	Sample Requirements for CBC/CTS Laboratory Testing
HLA-100-F-01	4.0	HLA Laboratory Requisition Form
REF-106-POL	01	Guidelines for the Transfusion of Sickle Cell Anemia Patients
REF-125-POL	00	Recognition and Investigation of Drug-Induced Immune Hemolysis
REF-200-F-01	3.0	Reference Case Request Form
REF-220-F-01	00	Order for Reconstituted Red Cells (Pediatric/exchange transfusion)
REF-400-POL	2.0	Provision of Immunologically Selected Platelets – Information for Hospitals
SECTION 4 ADVERSE TRANSFUSION EVENTS		
CSM-040-JA-01	00	Adverse Events Associated with Blood Transfusion (FACT SHEET)
HLSM-012-WI-02	2.0	Hospital Guidelines for Transfusion Reaction Workup
HLSM-012-JA-01	01	Transfusion Reaction Workup Flowchart
HLSM-012-JA-02	00	Hospital Transfusion Reaction Guidelines
HLSM-012-JA-03	00	TRALI: Transfusion Related Acute Lung Injury Information Sheet
HLSM-012-F-01	00	Investigation of Suspected Transfusion Reaction
Reference Document	---	NHSN Biovigilance Component/ Hemovigilance Module Surveillance Protocol
SECTION 5 COLLECTION SERVICES		
CS-402-JA-01	4.0	Autologous Information for Physicians
CS-402-JA-02	3.0	Instructions/Information for Autologous Donors
CS-402-F-02	4.0	Physician Order for Autologous Donor
CS-403-JA-01	4.0	Information for Physicians Ordering Therapeutic Phlebotomy
CS-403-F-01	02	Physician Order for Therapeutic Phlebotomy
CS-404-JA-01	2.0	Directed Donation Information
CS-404-F-01	00	Physician’s Order and Consent for Directed Blood Donations
CS-404-F-02	00	Patient Request, Consent, and Release for Directed Blood Donations
CS-404-F-03	2.0	Directed Donor Information

SECTION 6 - PDT / LOOKBACK, BACTERIAL DETECTION		
CS-600-WI-02	2.0	PDT Instruction for Hospital Transfusion Services
CS-600-F-02	5.0	Post Donation Information Notification/Withdrawal (CBC completes form)
HLSM-010-F-04	1.0	Lookback Notification
HLSM-010-F-07	1.0	Import Lookback Notification Letter
HLSM-010-WI-13	1.0	Lookback Instructions for Hospital Transfusion Services
HLSM-013-WI-01	2.0	TTD Cases
HLSM-013-F-01	2.0	Transfusion Transmission Disease Investigation
MIC-307-WI-06	00	Hospital Notification of Bacterial Detection
MIC-307-F-02	00	SDP Notification - Bacterial Detection (CBC completes form)
SECTION 7- EMERGENCY - DISASTER		
HLSM-020-WI-01	2.0	Initiating an Emergency Release
HLSM-020-F-01	3.0	Emergency Release Form (CBC completes form)
HLSM-020-F-02	2.0	Emergency Release Shipment Label: (CBC completes label)
HS-200-F-06	02	Notification of Blood Shortage - Yellow (CBC completes form)
HS-200-F-07	00	Notification of Blood Shortage - Red (CBC completes form)
HS-200-F-08	00	Notification of Blood Shortage - Recovery (CBC completes form)
TSP-100-POL	00	Blood Shortage-Disaster Plan
TSP-100-WI-01	00	Blood Shortage-Disaster Plan Impact Status
TSP-100-WI-02	00	Blood Shortage-Disaster Plan Hospital Notification
TSP-100-WI-03	00	Blood Shortage-Disaster Plan Communication
TSP-100-JA-01	00	Domestic Preparedness / Blood Product Shortage Contingency Plan (Flow)
TSP-100-JA-02	00	Blood Shortage-Disaster Plan Hospital Impact
TSP-100-JA-03	00	Blood Shortage-Disaster Plan Hospital Guidance
TSP-100-JA-04	00	Blood Shortage-Disaster Plan Hospital Blood Shipment
SECTION 8 - QUALITY - ADMINISTRATIVE		
Reference Document	---	CMS Clinical Laboratory Improvement Amendments (CLIA) Complaints
CSM-080-WI-01	00	Accessing CBC Accreditation/Registration Documents
QRA-402	5.0	Completing a Blood Product Storage Assessment
QRA-402-F-01	4.0	Blood Product Storage Assessment (Form)

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