

\* Forms for hospital use are highlighted and are available on-line at [www.cbcts.org](http://www.cbcts.org).

SECTION 1 - INTRODUCTION		
Document Number	Version	Document Title
CSM-010-POL	3.0	Customer Service Manual (policy)
CSM-010-WI-01	3.0	Customer Service Manual Update
CSM-010-WI-02	3.0	Accessing CSM Hospital Forms From Website
CSM-010-WI-03	3.0	Hospital Instructions for Obtaining a Circular of Information (COI)
CSM-010-JA-01	3.0	Quick Phone Reference
CSM-010-JA-02	4.0	Contact Information
CSM-010-JA-03	3.0	Document Guidelines
SECTION 2 - HOSPITAL SERVICES		
CSM-020-JA-01	1.0	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
<b>HS-200-F-04</b>	<b>3.0</b>	<b>Inventory Report and Order Form</b>
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
<b>HS-300-F-01</b>	<b>3.0</b>	<b>Product Return/Transfer Report</b>
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

<b>SECTION 3 LAB SERVICES – REF - HLA</b>		
<b>HLA-100-F-01</b>	<b>3.0</b>	<b>HLA Laboratory Requisition Form</b>
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
<b>REF-200-F-01</b>	<b>3.0</b>	<b>Reference Case Request Form</b>
<b>REF-220-F-01</b>	<b>00</b>	<b>Order for Reconstituted Red Cells (Pediatric/exchange transfusion)</b>
REF-400-POL	2.0	Provision of Immunologically Selected Platelets – Information for Hospitals
<b>SECTION 4 ADVERSE TRANSFUSION EVENTS</b>		
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
<b>HLSM-012-F-01</b>	<b>00</b>	<b>Investigation of Suspected Transfusion Reaction</b>
<b>SECTION 5 COLLECTION SERVICES</b>		
<b>CS-402-JA-01</b>	<b>4.0</b>	<b>Autologous Information for Physicians</b>
<b>CS-402-JA-02</b>	<b>3.0</b>	<b>Instructions/Information for Autologous Donors</b>
<b>CS-402-F-02</b>	<b>4.0</b>	<b>Physician Order for Autologous Donor</b>
<b>CS-403-JA-01</b>	<b>4.0</b>	<b>Information for Physicians Ordering Therapeutic Phlebotomy</b>
<b>CS-403-F-01</b>	<b>02</b>	<b>Physician Order for Therapeutic Phlebotomy</b>
<b>CS-404-JA-01</b>	<b>2.0</b>	<b>Directed Donation Information</b>
<b>CS-404-F-01</b>	<b>00</b>	<b>Physician’s Order and Consent for Directed Blood Donations</b>
<b>CS-404-F-02</b>	<b>00</b>	<b>Patient Request, Consent, and Release for Directed Blood Donations</b>
CS-404-F-03	2.0	Directed Donor Information

<b>SECTION 6 - PDT / LOOKBACK, BACTERIAL DETECTION</b>		
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
<b>HLSM-013-F-01</b>	<b>2.0</b>	<b>Transfusion Transmission Disease Investigation</b>
MIC-307-WI-06	00	Hospital Notification of Bacterial Detection
MIC-307-F-02	00	SDP Notification - Bacterial Detection (CBC completes form)
<b>SECTION 7- EMERGENCY - DISASTER</b>		
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	1.0	Blood Shortage-Disaster Plan
TSP-100-WI-01	1.0	Blood Shortage-Disaster Plan Impact Status
TSP-100-WI-02	1.0	Blood Shortage-Disaster Plan Hospital Notification
TSP-100-WI-03	1.0	Blood Shortage-Disaster Plan Communication
TSP-100-JA-02	1.0	Blood Shortage-Disaster Plan Hospital Impact
TSP-100-JA-04	1.0	Blood Shortage-Disaster Plan Hospital Blood Shipment
<b>SECTION 8 - QUALITY - ADMINISTRATIVE</b>		
CSM-080-WI-01	1.0	Accessing CBC Accreditation/Registration Documents
QRA-402	5.0	Completing a Blood Product Storage Assessment
<b>QRA-402-F-01</b>	<b>4.0</b>	<b>Blood Product Storage Assessment (Form)</b>

END