**BLOOD COMPONENT GRAM STAIN & CULTURE FORM**

**TRANSFUSION SERVICE STAFF**

* Send one (1) lab request with each blood component bag to Microbiology Lab.
* Keep copy of form in TSL

**Suspected Transfusion Reaction**--Log in TXRXC

(This includes a STAT gram stain and routine bacterial culture.)

**Component Type of Unit being cultured:**

\_\_\_ Platelets

\_\_\_ Red Blood Cells

\_\_\_ Plasma

\_\_\_ Cryoprecipitate

\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**MICROBIOLOGY LAB STAFF**

* Identification only, No sensitivities
* Call Preliminary Positive results to TSL staff at 206 744- 3088

|  |  |
| --- | --- |
| **Date received for culture** |  |
| **ACC # of X-Match order** |  |
| **Unit Number** (enter at specimen description) |  |
| **HTSL -**  |  |

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| --- |
| *Place Patient**SUNQUEST LABEL**Here* |