UW Medicine UNIVERSITY OF WASHINGTON MEDICAL CENTER	**Approved Label Form**

Label Name	Manufacturer	Item#	Copy of Approved Label Format	Date In Use	Manager Review

Note: NOT for use with ISBT 128 blood component labels

Supervisory Review:_____ Date:_____

Transfusion Service Laboratory
University of Washington Medical Center, 1959 NE Pacific Street, Seattle, WA 98195