American Red Cross Biomedical Services Washington, DC 20006

Form: Trima Apheresis Procedure Record

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Level 4 Subtype: Form		Training Subtype:		Mang Fac: BHQ	

USER INFORMATION					
First Name	BRAIDY	Last Name	MENDEZ		
Gender	F	Date	11 MAY 2016		

DONOR DETAILS							
Email BRAIDY.MENDEZ@HOTMAIL.		HOTMAIL.NET		Nationality	_		
Hct	-		Total Blood Volume (TBV)	-		Platelet Pre- count	-

SUPPLY INFORMATION				
Item		Lot No		
ACD-A	_			
0.9% Normal Saline	_			
Additive	_			

SIGNATURE	
Sign below	