



MGM
NEW BOMBAY HOSPITAL, VASHI

NABH ACCREDITED

Navi Mumbai - 400703. Tel.: (022) 5066 6777



JCI ACCREDITED

MR. KIRAN BHAGWAN TAWARE

UHID : MGM240017131 IPD : MGMIP2406720

Age/Sex : 56 Years /MFOA : 05/10/2024

BED : SICU-010 WARD : SICU

DR : DR.PRASHANT ATHALE

BLOOD REQUISITION

Name of Patient: _____ Age: _____ Sex: M/F IP No. _____ Pt. No. _____ Date: 17/10/24

Blood Group R BhtwRb 7.0 /Pt Count 428 Date of Admission 5/10/2024 Ward SICU

WHOLE BLOOD	PACKED CELLS	FFP'S	PIT. CONE	
			SDP	RDP
Unit Supply / Reserve	Unit Supply / Reserve	Unit Supply / Reserve	Supply on	Demand only
History of Previous Transfusion:	1 unit			
Obstetrics History in case of Female Patients				

Required on: _____ Date 17/10/24 at 2 : 30 AM/PM

History in Short: Post operative - Appendectomy with Routine / Emergency / Requirement

Reason for transfusion: Peritonitis Anaemia

Name of the Hosp. MGM, New Bombay Hospital Vashi

Name of Phlebotomist / Nurse Collecting Blood

- Note:
- 1) Label the sample properly (with same name on the requisition form) along with IP No. & ward.
 - 2) 1.0 ml of EDTA & 4.0 ml of blood in a plain bulb is to be sent for grouping & cross-matching.
 - 3) Doctors to recheck the samples before sending to the Blood Bank.
 - 4) Blood once issued will not be accepted back.**

Name & Signature of DMO Dr. Renuka RAS
with Registration No. D1681

Name of Consultant Dr. Prashant Athale
with Registration No.