

I accept responsibility for the safe delivery of _____ vials of

_____ (name of product) to

_____ (recipients name and date of birth)

for home infusion.

Retained in transfusion Medicine Laboratory

Storage and Transport Instructions for Blood Products

- Store between 2°C and 25°C
- Do Not Freeze
- Only Leave in car During Transport
- Deliver to Recipient as soon as possible

Place on transport container