



Request for Autologous Collections

LifeSouth Community Blood Centers

Submit requests no later than 21 days prior to the surgery date. The Medical Office must approve requests prior to patient collection.

Section A: Patient Information

Last Name		First Name	Middle Name	SSN	MR# (if applicable)
Address		City	State	Zip	Home Phone Alternate Phone
Blood Type	Date of Birth ¹	Hospital		Date of Surgery	
Surgical Procedure: <input type="checkbox"/> Bilateral Hip/Knee <input type="checkbox"/> Spine, multiple levels <input type="checkbox"/> Redo hip/knee <input type="checkbox"/> Redo cardiac surgery <input type="checkbox"/> Other, please describe:				Patient Diagnosis:	
List all medications prescribed for this patient:					
Please check any past or present medical conditions that apply to this patient: <input type="checkbox"/> Cardiac/Cardiovascular Disease* <input type="checkbox"/> Arrhythmia* <input type="checkbox"/> Pulmonary Disease <input type="checkbox"/> Stroke* <input type="checkbox"/> Current Anticoagulant Therapy* <input type="checkbox"/> Seizures <input type="checkbox"/> Other (list all other conditions):					
*A written cardiac release is required for these patients. Please provide the name of the patient's cardiologist/primary physician. Please attach written approval from the listed physician for autologous blood collection.					
Cardiologist/Primary Physician Name: _____ Phone: _____					

Section B: Blood Components Requested

Check one: <input type="checkbox"/> Packed Cells <input type="checkbox"/> Other	Number needed: <input type="checkbox"/> 1 <input type="checkbox"/> 2
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Section C: Requesting Physician Signature

Signature, MD:	Date:	
Physician (printed name):	Phone:	Fax:
Address:		

Section D: Blood Center Medical Office Decision

Name of Medical Director (or designee):	
<input type="checkbox"/> APPROVED for _____ units of Whole Blood --> Packed cells +/- FFP	<input type="checkbox"/> NOT APPROVED
Signature:	Date:
Comments:	

Fax completed form to the Medical Office at (888) 286-0179.

¹ Autologous donations are limited to patients from age 18 through age 65.