



NAME & ADDRESS OF BLOOD BANK

Licence No.:- _____

**QC OF PLATELET CONCENTRATES BY APHERESIS
(CS-13)**

DATE : / / 201

DATE	UNIT NO.	VOUME (ml)	pH	PLATELET COUNT X 10 ¹¹ /bag	WBC COUNT X 10 ⁶ /bag	RBC COUNT (ml)	SWIRLING	STERILITY	MACHINE USED	PREPARED BY	REMARKS
ACCEPTED RANGE		>200	>6.0	≥ 3.0-7.0	<5.0 (IF Leucodepleted)	< 0.5					

Signature of Quality Manager/Technical Supervisor: _____

