

1. Ordering Physician completing this form	
2. Ordering Physician contact Number/pager	
3. Date	
4. Time submitted	
5. Patient's name	
6. MRN	
7. Ward	
8. Covering attending physician	
9. Date needed	
10. Type of therapeutic apheresis procedure	Leukapheresis Red cell exchange Plateletpheresis Plasma exchange Plasmapheresis
11. Number of procedures to be performed	
12. Vascular access available	yes no

Therapeutic Apheresis Vendor Ordering Sheet

Please fax copy to 4G103 Nursing Office (441-8261) Telephone Number (x97401)

Reminder: Blood products are ordered through the Blood Bank. Albumin is ordered through the pharmacy.