

Record of Factor Issued Form

(Please email factorsupplies@ouh.nhs.uk or fax to 01865 225608)

To be completed by blood bank and <u>returned</u> to OHTC prior to ordering additional factor for inpatients or on patient discharge.

Patients Name:	Consultant:
D.O.B.	Hospital:
NHS No.	
Factor Issued:	

Date	Time	Product	Units	Batch Number