

Autologous Blood Collection

Complete sections A -E of the Special Collection Order and fax to (800) 886-7024.

Form Section	Instructions
A	<ul style="list-style-type: none">The patient ID is an optional field, but if a medical records ID is required by the hospital on the directed donor unit, it should be provided.
B	<ul style="list-style-type: none">Orders for Autologous units are limited to Red Cells and Frozen Plasma (other).All Autologous units will be leuko-reduced as part of our standard manufacturing process.
C	<ul style="list-style-type: none">Provide the patient's weight, medications, and conditions.
D	<ul style="list-style-type: none">Ordering MD, DO, DDS, DMD, DPM, NP, PA, PA-C, CM, or CNM must sign and date.
E	<ul style="list-style-type: none">Complete this section only if the patient has a cardiac diagnosis.

- In some cases, American Red Cross staff may request additional medical clearance for an Autologous blood donation, but the acceptability for blood donation will be determined by the American Red Cross Regional Medical Director or designee.
- Orders must be received before appointments can be scheduled by the Special Collections Scheduling Team.
- A service charge is added to the cost of autologous blood to cover the special handling of these units. This charge may not be covered by insurance. As a representative of the transfusing facility your signature represents their agreement to receive the units ordered whether used by the intended recipient or not.
- The donor's hemoglobin must be 11 gm/dL or greater.
- We advise that collections be made at least 2 weeks prior to the date of need to allow for processing of the blood but may be collected up to 42 days in advance.

Contact: Special Collections Scheduling
Email: vFaxForSCS@redcross.org
Phone Number: 800-634-9069
Fax Number: 800-886-7024
Business hours: 8:00 a.m. to 5:00 p.m.



**American
Red Cross**