**CORD BLOOD TRANSPLANTATION STUDY**

**CBU PROCESSING FORM**

1. Processing technologist number: __________

2. Date and starting time: __________
   - mm / dd / yyyy
   - hrs : mins
   
   (24-hr clock)

3. Were labels placed on:
   - Processing bag set: 1 [Yes] Set #: __________
   - Sterility test bottles: 1 [Yes]
   - Slides: 1 [Yes]
   - Cryovials: 1 [Yes]
   - Sample tubes: 1 [Yes]
   - Man./Exp. date: __ / __ / ______

**COLLECTION BAG (BAG #1)**

4. Record the following:
   - Study ID: __________
   - Automated nucleated cell count x10^6/ml: __________
   - % Viability: __________
   - % Nucleated erythrocytes: __________
   - % Mononuclear cells: __________
   - Total nucleated cell count x 10^8: __________
   - Total mononuclear cell count x 10^8: __________

5. Slides for manual differentiation counts prepared: 1 [Yes]
   - Location: ________________

6. Blood Type
   - Rh: 1 [positive] 2 [negative]

   Volume of Hespan (final ratio 1:5 Hespan: cord blood + anticoagulant)
   
   - Study ID: __________

7. Volume of Hespan added: __________ ml

8. Hespan Lot #: __________
   - Expiration date: __ / __ / yyyy

   - Study ID: __________

9. Number of centrifugations to red cell deplete: __________
   - 1 [One] 2 [Two] 3 [Three or more]

**LEUKOCYTE-RICH PLASMA (BAG#2)**

10. Weight of Leukocyte-rich plasma (contents of Bag #2): __________ gm

   Weight of leukocyte-poor plasma to express from Bag#2 to Bag#3

   - Initials: __________

   - Study ID: __________

   - Data reviewed by: __________

   - Initials: __________
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CBU PROCESSING FORM

Bar Code Label

VOLUME DEPLETED LEUKOCYTE-RICH PLASMA (BAG#2)

11. Record the following:

Automated nucleated cell count x10^6/ml

% Viability

Hematocrit (automated cell count/manual)

If performed: % Nucleated erythrocytes

% Mononuclear cells

Total nucleated cell count x 10^6

% Recovery of viable nucleated cells

Total mononuclear cell count x 10^8

% Recovery of viable mononuclear cells

Study ID:

12. Slides for manual differentiation counts prepared? 1 Yes

Location: ________________________

13. Number of centrifugations to plasma deplete........ 1 One 2 Two 3 Three or more

Study ID:

14. Processing end time: __________________________________________

Data reviewed by

Study ID: __________

ASSAY AND STORAGE SAMPLES

15. Hematopoietic cell assays:

Samples taken for - Flow cytometry 1 Yes

- Colony assay 1 Yes

Study ID:

16. Sterility assay performed (plasma + granulocyte/red cells) 1 Yes

Study ID:

17. Samples for future tests:

Freezer location for leukocyte poor plasma

Freezer location for granulocyte/red cell

# Samples

Study ID:

Comments: _______________________________________________________________________________________

Signature of Final Reviewer ___________________________ Date ___________________________

Study ID:

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