CORD BLOOD TRANSPLANTATION STUDY

CBU PROCESSING QA REPORT

Assessment Period: 1 ☐ Pre Freeze 2 ☐ Post Thaw

1. Processing technologist number: 

2. Date and time sample processed/thawed: 
   mm dd yyyy hrs mins (24-hr clock)

3. Processing/cell wash infusion bag set number:

4. Record the following for the Pre-freeze or Post-thaw sample:
   - Total sample volume: m
   - Automated nucleated cell count x10^6/ml: 
   - % Viability: 
   - If performed: % Nucleated erythrocytes % Mononuclear cells

5. Using Procount (or equivalent), record the following:
   - Date of acquisition: mm dd yyyy
   - Nucleated cell count (dye-positive cells/µl): x 10^3
   - CD45+ count (cells/µl): x 10^3
   - Total number of CD45+ events acquired:

<table>
<thead>
<tr>
<th>CD34 Marker (Dilution factor 1.0--modify as necessary,)</th>
</tr>
</thead>
<tbody>
<tr>
<td># CD34+ events acquired</td>
</tr>
</tbody>
</table>

Analyzer’s laboratory certification number:

6. Record colony assay data:
   - Total CFU-GM x 10^5: 
   - Total BFU-E x 10^5: 
   - Total CFU-GEMM x 10^5:

7. Colony assay analyzer’s certification number:

Comments: __________________________________________________________

_________________________________ ____________________________
Signature of Final Reviewer                                              Date        Study ID

V02, 07/99