


Blood donation complex



Apheresis Unit



Rare blood Donor Registry



KASTURBA HOSPITAL BLOOD CENTRE

RARE BLOOD DONOR REGISTRY

Proforma to Request Rare Blood

Name * **Age ***
First Name Last Name

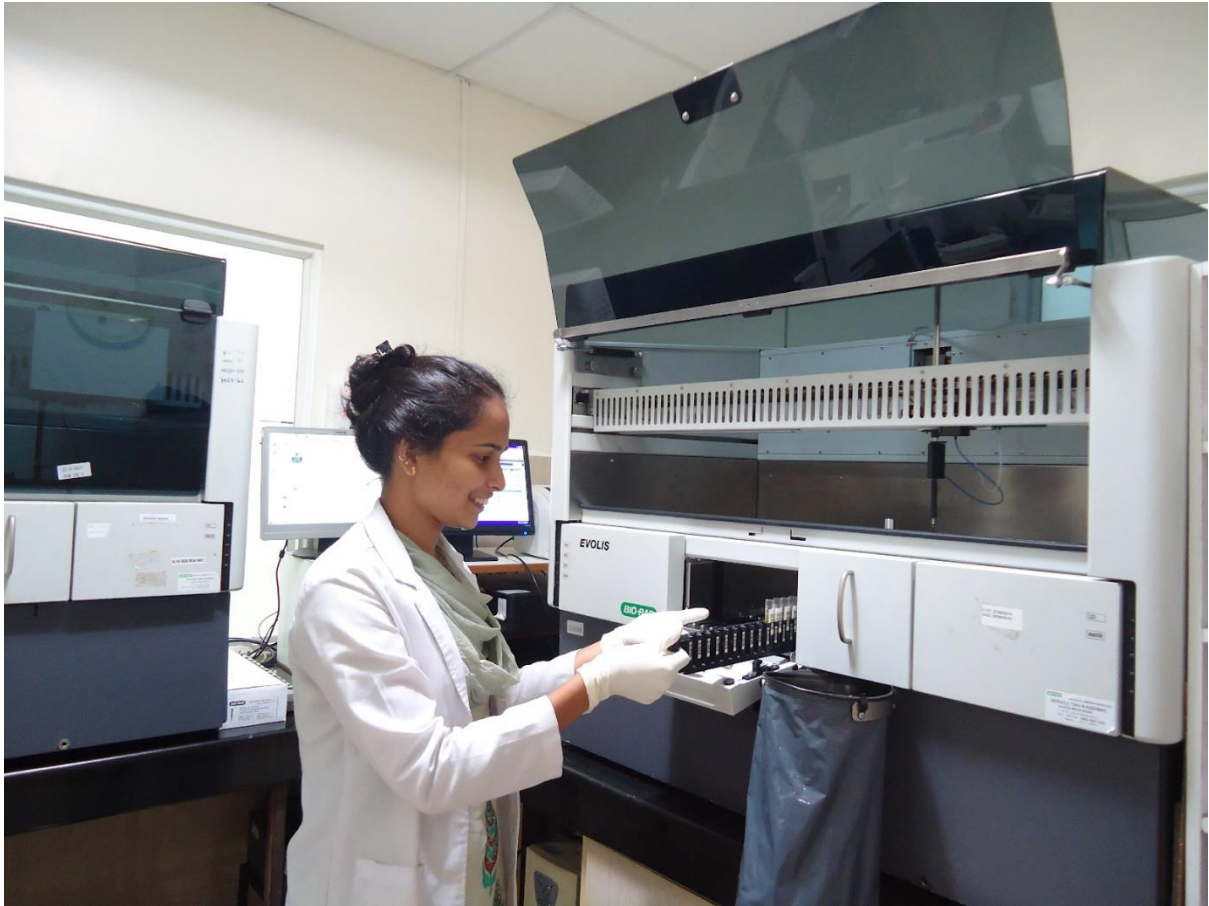
Gender * Male Female Others **Diagnosis ***

Patient Attendant Name *
First Name Last Name

Attendant Phone Number *

Blood Details	Type of Blood Required *
Blood Group * <input type="text"/>	<input type="text"/>
Immunohematological Workup Done <input type="text"/>	Number of Units Required * <input type="text"/>

Transfusion Transmissible Infection Screening Laboratory



Nucleic Acid Amplification Technology Laboratory



Therapeutic Apheresis Procedure



Thrombotic Microangiopathy Diagnostic Workup



KASTURBA HOSPITAL
MANIPAL

(Teaching hospital of KMC Manipal, a unit of MAHE)

**Kasturba Hospital
Blood Centre**

Happy to Announce

Diagnostic Panel For Thrombotic Microangiopathies

1. ADAMTS 13 ACTIVITY LEVELS (ADA 001)
2. ADAMTS 13 INHIBITOR LEVELS (ADA 002)
3. COMPLEMENT FACTOR H LEVELS (COM 049)
4. ANTI FACTOR H LEVELS (ANT 056)

Dept of Immunohematology & Blood Transfusion, CCBHD,
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Best Institution award

