



# Hospital-to-Hospital Transfer Notice

LifeSouth Community Blood Centers

**Important!** This transfer form only serves to facilitate proper billing. If the blood center later recalls or performs a recall and/or lookback on transferred components, the recall and/or lookback notice will be sent to the transferring (original) hospital. Blood center records will show the transferring hospital as the final consignee. The transferring hospital is responsible for forwarding any recall and/or lookback notice to the receiving hospital. The blood center will not maintain records of the final destination hospital.

## A. Transfer Details

**Instructions:** Complete this section to receive credit for the transferred component(s).

Transferring Hospital:	Transfer Date:
Authorized Representative:	Title:
<b>Signature:</b>	

DIN*	Product Code(s)*	Quantity	DIN*	Product Code(s)*	Quantity

**Note:** Obtain the DIN and the product code from the component label.

## B. Receipt Details

**Instructions:** Complete this section as an agreement to pay the total cost of the transferred component(s). By signing this document, the hospital receiving the transferred components confirms the receipt of the products listed in the **Transfer Details** section. A signature constitutes an agreement to pay the cost of the transferred components, with the understanding that the blood center will reimburse the transferring hospital for these charges.

Receiving Hospital:	Receipt Date:
Authorized Representative:	Title:
<b>Signature:</b>	

## C. Blood Center Approval

**Instructions:** As instructed in **HS.10.2**, obtain an approval signature and then forward form to the Accounting Department.

Name of Approver:	Title:
<b>Signature:</b>	Date: