Whole Blood Performance Report



Important: If reaction or injury has occurred call Fresenius Kabi Post-Market Quality Assurance at 1-800-933-6925.

Incident Date:			oplicable):			
Product Code:	Filter No.:					
When Was the Problem						
	Donation (at collection	•	Centrifugation		lected product)	
□ Donation □ Filtra	<u> </u>		-	☐ Other (specify)		
Problem Type (Mark all a					☐ Pre-activated Cannula	
☐ Broken ☐ Cut/Slice				☐ Excess Moisture	☐ Blocked/Restricted	
☐ Missing ☐ Difficult to		□ Bent □ Se	eparated	☐ Particulate Matter	T ☐ Other (specify)	
Please answer the follow		7 N I				
. Was there any adverse 2. Was the procedure su	, ,		NI/A 🖂			
3. If no, was the procedu			•	Jo П N/A П		
1. Was product lost? Ye		9000	o	.0 =, / . =		
Check box if you do NO '	wish to receive respon	nse letters. 🗆				
			E-mail add	ress for letter recipie	nt (if applicable)	
Please circle specific co	mponents on the diag	ram where inc	ident occurre	ed		
	BPU Configura	ations		Satell	ite/Secondary Containers	
BPU Without Filter	BPU With I	ntegral	BPU With In	tegral	. Y-connector	
Y-connector	Whole Blo	od Filter	RBC Filter	To BPU		
		Collection		← —	Tabs Cannula /	
To Veedle		Container			Tabs Plug Callida , Tabs	
Cannula Cannula	Tabs Lab		ection Labe	ı 		
Plug Tabs		Cont	tainer			
Tabs → A A A				Satallita	Label Label Label	
		Cannula		Satellite - Container		
Label	Label	Cariffula	Cannula			
Laber	Laber	.Y-connector	∯-	Y-connector	ADSOL / Satellite /	
	To To	r-connector		To Satellite	Container Container	
↑ ↑	Needle	Check	-	Container	Sterile Connect Filter	
	atellite Container	Valve ■—Bushing	To Needle	Cannula Y-connector	Spike/Luer	
		<u>L</u>		Check	Y-connector	
Needle/Sampling	System	→ Filter		Valve Check		
Needle Gu	ard	7	Filter -	Valve	TRANSFER-PACE	
No Sampling	To BPU Bushing	To Satelli Containe		Segment	Luer	
Needle Cover Need	le Hub	Cannula	-	Tubing	Bushing	
				Tabs	Filter Tabs	
Y-Sampling Site Y-site	To BPU	Tabs				
	─		,	Tabs	Bushing A A	
Sampling Diversion System	Clamp	Post			Container	
Sampling Y-site	<u> </u>	Post- Filtrati		Post- Filtration		
Pouch Y-connector	To BPU	Label Contai	ner La	abel Container Lak	Container Label	
Cannu						
			7			
Additional Problem Des	cription / Explanation					
Kit Return To Fresenius Kabi				Customer Information (please print)		
1. Sample available for evaluation? Yes ☐ No ☐				The following information is required to receive a credi		
2. Sample return box needed? Yes \(\sigma \) No \(\sigma \) Return label only			,	Facility Name:		
3. Picture available for evaluation? Yes \(\simega \) No \(\simega \)				Contact Person:Account Number (if known):		
Please e-mail a clear picture along with this report to mdpmqa.usa@fresenius-kabi.com				Operator Name:		
Center Authorized Signature/Date:						
				ontact Person's E-mail:		

Fax this report to 1-888-858-2983 or E-mail to mdpmqa.usa@fresenius-kabi.com and include a copy of this form when returning a kit.