

**Figure 3 Blood pack labelling**

**Compatibility label or tie-on tag**

The compatibility label is generated in the hospital transfusion laboratory. It is attached to the blood bag and contains the following patient information: *Surname, First Name(s), Date of Birth, Gender, Hospital Number/Patient Identification Number, Hospital and Ward.*

The *blood group, component type and date requested* are also included on the label. The *unique donation number* is printed on the compatibility label; this number must match exactly with the number on the blood bag label.



**STOP, SEE BACK OF THIS TAG BEFORE TRANSFUSION**

**NHS**  
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Donation No: **G101 606 597 229 N**  
 Component: **Red Cells**  
 Signature 1: \_\_\_\_\_ Date Given: \_\_\_\_\_  
 Signature 2: \_\_\_\_\_ Time Given: \_\_\_\_\_

**Peel off label above and place in patient's Medical Records**

Surname: <b>MACDONALD</b>	Forename: <b>MORAG</b>
DOB: <b>11/07/1956</b>	Gender: <b>FEMALE</b>
<b>25 HILL STREET TOWN CENTRE</b>	
Patient Identity No: <b>100198E</b>	Date/Time Required: <b>20/12/2006</b>
Patient Blood Group: <b>O Rh POS</b>	Component: <b>Red Cells</b>
Donation Number: <b>G101 606 597 229 N</b>	
Special Requirements:	
Once transfusion has been started, you must send the completed section below to the Hospital Transfusion Laboratory. This is a legal requirement	
Surname: <b>MACDONALD</b>	Forename: <b>MORAG</b>
Patient Identity No: <b>100198E</b>	Lab Sample No: <b>1803905</b>
Donation Number: <b>G101 606 597 229 N</b>	
Component: <b>Red Cells</b>	
Date Given:	Time Given:
I confirm that the above patient received this blood component. Sign and Print Name	

**Unique donation number**

This is the unique number assigned to each blood donation by the transfusion service and allows follow-up from donor to patient. From April 2001 all donations bear the new 14 digit (ISBT 128) donation number.

The unique donation number on the blood bag must match exactly the number on the compatibility label.

**Blood group**

Shows the blood group of the component.  
**This does not have to be identical with the patient's blood group but must be compatible.**

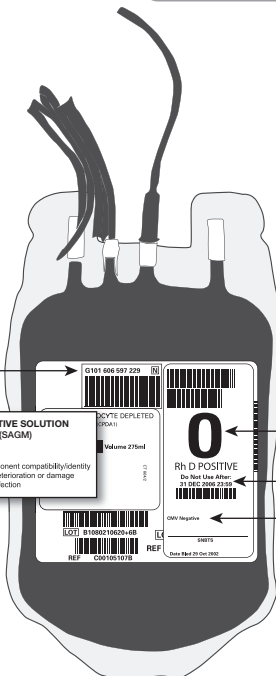
**Group O patients must receive group O red cells.**

**Expiry date**

The expiry date must be checked – do not use any component that is beyond the expiry date.

**Cautionary notes**

This section of the label gives instructions on storage conditions and the checking procedures you are required to undertake when administering a blood component. It also includes information on the component type and volume.



**Special requirements**

This shows the special features of the donation, e.g. CMV negative.