Component Code (Codabar) Request Form

UK Blood Services
Component Code (CODABAR) Request Form (to be used in conjunction with processes defined in Red Book)

Section 1; Details of request – To be completed by Requestor / Change Manager

Requestor Name:		Email address:	
Organisation:		Change control:	(insert CC reference number)

Component Description (including method of manufacture)	Reason for request

Shelf Life	
Anticoagulant Volume	
Additive Volume	
Storage Temperature	
Volume of component	
Other parameters (e.g. Haematocrit)	
Proposed Label Text (Max Chars)	
Component Description line 1	
Component Description line 2	

Please enter the contact details of individuals from other Blood Services who have already been consulted regarding this request:

Please send this form to SACBC for review

Section 2; Outcome of request – To be completed by SACBC

Approved/ Not approved (Delete as necessary)

Signed on behalf of SACBC		Date:	

Please send this form back to the Requestor / Change manager and request that they liaise with I.T. systems support within their organisation

Section 3; To be completed by I.T. Systems Support

Further information required? Yes / No (delete as applicable)

Enter details of further information;

Signed on behalf of I.T. Systems Support		Date:	

Please send this form to SACIT for review

Section 4; To be completed by SACIT

Component code(s) allocated;

Signed on behalf of SACIT:		Date:	

Please return this form to I.T. Systems Support