DEPARTMENT OF THE ARMY
HEADQUARTERS, US ARMY MEDICAL DEPARTMENT ACTIVITY
4301 WILSON STREET
FORT SILL, OKLAHOMA 73503

REPLY TO
ATTENTION OF

MEMORANDUM OF AGREEMENT (MOA)
AMONG
REGIONAL MEDICAL CENTER (RMC) BLOOD MANAGER
AND
UNITED STATES ARMY FIRES CENTER OF EXCELLENCE AND FORT SILL (USAFCOEFS)
AND
UNITED STATES ARMY GARRISON (USAG) FORT SILL
AND
UNITED STATES ARMY MEDICAL DEPARTMENT ACTIVITY (USAMEDDAC)
REYNOLDS ARMY COMMUNITY HOSPITAL (RACH)
AND
THE OKLAHOMA BLOOD INSTITUTE (OBI)

RHC-C (P)-RACH-16-001
RMO-NO01
USAFCOEFS 150308

SUBJECT: Oklahoma Blood Institute Civilian Blood Collection Agency Collecting Blood on Fort Sill

This is an MOA between the RMC, USAFCOEFS, USAG, RACH, and OBI. When referred to collectively, the RMC, USAFCOEFS, USAG, RACH, and OBI will be referred to as the "Parties".

1. REFERENCES.

a. Health Affairs (HA) Policy 04-019, Revised Policy Regarding Civilian Blood Collections on Military Installation, Leased Facilities and Aboard Ships, 10 August 2004.

b. HA Policy 04-015, Revised Policy Regarding Standardization of Infectious Disease Reporting Requirements for Civilian Blood Agencies Collecting Blood on Military Installations, at Military Leased Facilities or Aboard Ships, 21 June 2004.

c. Army Blood Program Policy Letter 2008-01-01, Army Blood Program Policy for collecting Red Blood Cells (RBC) by Automated Apheresis Methods, 08 January 2008.

d. Department of Defense (DOD) Instruction 4000.19, Support Agreements, 25 April 2013.

e. TRADOC Policy, Blood Donations in Initial Entry Training (IET), dated 14 September 2004.

f. Army Regulation (AR) 40-5, Preventive Medicine, 24 May 2007.

g. AR 40-03, Medical, Dental, and Veterinary Care, Chapter 5, 23 April 2013.

h. AR 25-50, Preparing and Managing Correspondence, 15 May 2013.

i. DoDI 1400.25 and 5 CFR 630-206 authorize excused absences for blood donation.

2. PURPOSE. To outline the process and procedures under which the OBI will collect blood on Fort Sill, OK, to include provisions for OBI to provide credits and/or blood bank services at no cost to the military in exchange for access to volunteer blood donors on Fort Sill, OK, and notification and reporting of unexpected/abnormal transfusion-associated infectious disease test results by the OBI.

3. BACKGROUND.

a. DOD policy, as outlined in HA Policy 04-019, requires an MOA be established between all civilian blood collection agencies and military installations or activities that allow the civilian organization access to the blood donors on the military installation or activity. The policy outlines the conditions and procedures under which the civilian blood collection agency is allowed to collect blood from volunteer blood donors on the military installation and also requires the MOA to include a provision to grant credits for blood and blood products and/or blood bank services at no cost to the military in exchange for access to the donors on the military installation.

b. HA Policy 04-015 outlines procedures and responsibilities for civilian blood collection agencies collecting blood from donors on military installations regarding the notification of blood donors with unexpected/abnormal transfusion-associated infectious disease test results and the notification of affected blood recipients.

c. Per Army Blood Program Policy Letter 20080101, dated 08 January 2008, the OBI will ensure that double red cell (apheresis) collections will NOT occur on any mobile drives conducted by the OBI on Fort Sill or other military related sites.

d. The MOA outlines the procedures and conditions under which the OBI will collect blood from volunteer blood donors on Fort Sill, OK, and provide credit for blood/blood products and/or blood bank services to the military. Credits accrued by RACH will be managed locally by the RACH Blood Bank Supervisor and regionally by the Regional Medical Command (RMC) Blood Manager and may be used or transferred to other military hospitals in the region, Department of Veterans Affairs hospitals, or otherwise used as the RMC Blood Manager or Army Blood Program Manager may determine.

4. RESPONSIBILITIES OF THE PARTIES.

a. Mutual Responsibilities

(1) At the direction of the RACH and the Installation Commanders, the RMC Blood Manager will manage the administration of this agreement. The OBI will appoint a representative who will work with the RMC Blood Manager to coordinate and implement the provisions outlined in this agreement.

(2) Permission to come on post may be suspended at any time for failure to comply with the requirements outlined in this MOA or when the RMC Blood Manager determines the blood donors on the military installation are needed by the Armed Services Blood Program in order to meet military blood requirements.

(3) Meetings between the RMC Blood Manager, RACH Laboratory Manager and a duly appointed representative from the OBI will be conducted as needed to discuss areas of concern or ways to improve implementation of the provisions of this agreement.

(4) Notwithstanding anything herein to the contrary, neither Party(ies) will be liable for any loss or damage of any kind arising out of delay or failure in performance of any obligation hereunder beyond that Party's(ies') reasonable control, including but not limited to any delay or failure caused by failure, unavailability or shortage of power, materials or supplies, flood, fire, storm, other abnormally inclement weather, other act of God, act of war, riot, act of omission of government or governmental agency (including Food and Drug Administration (FDA) withdrawal and recall recommendations), strike, work stoppage, other labor unrest, inadequate voluntary donations required for the rendering of the blood, other act or omission in the process of manufacture, production or supply under the control of third parties, or any other emergency.

(5) The Parties will comply with applicable laws and industry standards, including without limitation, requirements, regulations, standards, recommendation, specifications, guidelines and directives of the FDA and OBI; DOD HA Policies 04-015 and 04-019; Joint Commission and American Association of Blood Banks (AABB) standards; U.S. economic sanctions; anti-terrorism and anti-money laundering laws; the USA PATRIOT Act; laws administered by the U.S. Treasury Department's Office of Foreign Assets Control; and Executive Order 13224 ("Regulations"). In the event it is determined OBI policy conflicts with a HA Policy, the Parties will meet to discuss a mutually agreeable resolution.

(6) The RACH Laboratory Manager can be contacted at (580) 558-3376. The RACH Blood Bank Supervisor can be contacted at (580) 558-3080. The RMC Blood Manager is located at Brooke Army Medical Center, Fort Sam Houston, TX and can be reached at (210) 916-1180.

(7) There are risks, side effects and hazards associated with human blood products that cannot be prevented, even through careful blood donor screening and testing. These risks, side effects and hazards are set forth in the Circular of Information for the Use of Human Blood and Blood Components as prepared by the American Association of Blood Banks, America's Blood Centers and the American Red Cross and

recognized as acceptable by the U.S. Food and Drug Administration. It therefore follows the OBI cannot guarantee or warrant the blood in any way. OBI is not responsible for any loss or damage arising out of the blood unless and to the extent caused by OBI's negligence or misconduct.

b. Responsibilities of the Oklahoma Blood Institute

(1) Blood must be collected and processed in accordance with (IAW) requirements of the AABB and the FDA. Additionally, OBI must maintain a Clinical Laboratory Improvement Act (CLIA) certified laboratory for the performance of any transfusion related services, and maintain an active quality assurance program.

(2) All potential donors must be provided written information regarding specific tests performed on their sample of blood to include all testing required by the FDA at the time of donation.

(3) Provide personnel, supplies, and equipment for conducting blood drives on the installation.

(4) RACH will receive 0.2 credits for each productive unit of blood the OBI successfully collects and processes on Fort Sill, OK. Under this formula, one whole blood credit will accrue to the military installation for every 5 blood donors successfully collected from the military installation and processed by the OBI, representing a 5:1, or 20% whole blood (leukoreduced and non-leukoreduced) credit ratio. The value of 1 credit will equate to the current value of one leukoreduced RBC unit according to the current fee schedule.

(a) Blood and blood products may be exchanged and returned to the OBI IAW OBI's return policy set forth in Appendix A as part of inventory management and will not be counted against the accrued credit balance.

(b) Blood and blood products or blood bank services will be provided to RACH, other designated military or VA hospitals, or as otherwise determined by the RMC Blood Manager.

(c) Carry over credits for a period of 36-months from the date accrual.

(d) The OBI is responsible for the packaging and shipment of blood and blood products provided to RACH under the credit agreement.

(e) Will provide notification to the Public Affairs Office at least two weeks prior to blood drive even if requesting publicity through the Fires Bulletin.

(f) On a monthly basis, provide the RACH Blood Bank Supervisor with a blood collections and credit balance summary. The summary shall include blood drive dates with the number of units collected each day and be further broken down by military and

civilian collections (identify donor's unit or organization). The summary shall also identify credits earned for each blood drive, date credits were used, the blood/blood products provided, the credit balance at the end of the preceding month, and the credits at the beginning of the current month.

(5) Blood component shipment, storage and rotation are to be performed IAW AABB Standards 5.1.8A (Requirements for Storage, Transportation and Expiration).

(6) The following notification procedures must be taken by the OBI when unexpected/abnormal test results (includes repeat reactive, confirmed/unconfirmed positive, indeterminate or invalid infectious disease testing results) are obtained on a blood donor drawn on Fort Sill, OK.

(a) Active Duty Personnel: For active duty personnel, the OBI will: within seven (7) days following test completion, notify the military medical authority set forth in Section 4.a.(6)&(7) of all unexpected/abnormal test results to include repeat reactive, confirmed/unconfirmed positive, indeterminate or invalid infectious disease testing results, and notify, the active duty donors directly within 2 weeks after notifying the military medical authority.

(i) The donor notification letter must advise the donor of the availability of medical counseling and to seek follow-up through the military healthcare system.

(ii) If the military medical authority cannot be reached, the Director, Army Blood Program must be notified by the OBI. Deferred donors must be informed of the reason for the deferral; the types of donation the donor should not donate in the future, if appropriate; the results of the tests for evidence of infection due to communicable disease agents that were the basis for deferral, if applicable; and information concerning medical follow-up and counseling.

(b) Non-Active Duty Personnel: Dependents of active duty, retirees, dependents of retirees, government civil service employees, government contract employees, and non-DOD individuals must be notified by OBI of all unexpected/abnormal test results to include repeat reactive, confirmed/unconfirmed positive, indeterminate or invalid infectious disease testing results within seven (7) days of test completion.

(i) Donors must be advised to seek medical counseling through the military healthcare system if they are dependents or retirees and through their personal physician if government civilian or contract employees.

(ii) Deferred donors must be informed of the reason for the deferral; the types of donation the donor should not donate in the future, if appropriate; the results of the tests for evidence of infection due to communicable disease agents that were the basis of deferral, if applicable; and information concerning medical follow-up and counseling.

(7) Provide 24/7 telephonic consultation service for transfusion-related blood bank technical issues and blood bank pre/post transfusion testing support.

(8) Provide capability to perform therapeutic phlebotomies and autologous blood collections for eligible recipients with physician approval at a local facility as long as the services are needed and OBI is capable of providing the services. If OBI determines they are unable to provide these services, they must provide ninety (90) days prior written notice.

(9) The OBI will endeavor without guarantee to provide blood and blood products to RACH or other military hospitals so designated by the Laboratory Manager or RMC Blood Manager, on an emergency basis when so requested.

(10) Upon request by RACH, OBI will use reasonable efforts to provide blood, subject to availability and adequate voluntary donations.

(11) OBI is prohibited and will not perform double red cell collections by apheresis at RACH or at any other location on Fort Sill, OK, per Army Blood Program Letter 2008-01-01, 8 January 2008.

(12) Army Reserve and National Guard personnel will be notified by OBI in the normal manner as outlined in section 4.b.(6)(a)&(b).

c. Responsibilities of Reynolds Army Community Hospital.

(1) The RACH Laboratory Manager and/or the Blood Bank Supervisor will monitor blood drives conducted by OBI on Fort Sill, OK, to provide any necessary assistance with conducting the blood drive and to ensure blood donor screening and blood collection/processing procedures are being conducted in compliance with blood bank regulatory and accrediting agency standards.

(2) Maintain accountability of blood and blood products.

(3) Provide the OBI with appropriate notification of blood requirements based on the needs of RACH.

(4) RACH will keep complete and accurate records of patients supplied with the blood (including product names, lot identifications and quantities), any therapeutic adverse effects, complaints or other pertinent information relating to the blood. In the event RACH is not the ultimate recipient of the blood, RACH will ensure the receiving facility keeps such records and records therapeutic adverse effects or complaints.

(5) Upon discovery, RACH will ensure possible transfusion-transmitted infections or other serious complications associated with transfusion which may have resulted from the blood products supplied by RACH are reported to OBI (an **Adverse Event**). RACH will cooperate, or ensure cooperation, with OBI's investigation of any Adverse

Event and supply information concerning the recipient of the blood to OBI upon forms provided by OBI.

d. Responsibilities of the United States Army Garrison Fort Sill.

(1) Provide command support by encouraging blood donations during blood drives.

(2) Provide pre-event publicity via the Fires Bulletin, social media and web site, and other appropriate venues. The OBI shall provide notification at least two weeks prior to blood drives. Publicity will be based upon available space in the Fires Bulletin.

(3) Distribute promotional materials as appropriate.

(4) Common areas within facilities shall be used to accommodate blood drives, and the host organization will make the arrangements. If there is no common area in the building that has easy access, the host organization shall contact DPW Real Property Branch for an alternate space.

(5) Admit onto the installation ARC staff with such identification as may be required by the Provost Marshal, IMCOM, or DOD Policy or regulation. All personnel entering Fort Sill will undergo background screening at the Visitor Control Center (VCC) prior to being granted access, be in compliance with laws of the State of Oklahoma and will be subject to search under Federal regulations.

(6) Deny entry onto the installation as deemed necessary for security purposes, during times of disaster, etc.

e. Responsibilities of the Fort Sill Senior Commander.

(1) Provide command support by encouraging all units and activities located on the installation to provide volunteer blood donors during blood drives conducted by the OBI.

(2) Provide areas within facilities every 6-12 months to accommodate blood drives. Authorize use as appropriate that provides easy access for blood donors, and upon prior coordination with the occupant of the facility.

(3) the following organization will be available to OBI:

434th BDE and all subordinate units
428th BDE and all subordinate units
30th BDE (2-6 BN only)
NCOA
Reynolds Army Community Hospital

f. Responsibilities of the RMC Blood Manager.

(1) The Regional Blood Manger will act on behalf of RACH and the Installation and Garrison Commanders for administration of this agreement.

(2) Suspend permission at any time for the OBI to enter Fort Sill due to the agency's failure to comply with the requirements outlined in this MOA or upon determination that the blood donors on Fort Sill are needed by the Armed Services Blood Program in order to meet military blood requirements.

(3) Coordinate with the Blood Bank Supervisor to manage the credits accrued to RACH. Determine whether the credits should be used by Fort Sill or used otherwise--transferred to other military hospitals in the region, transferred to Department of Veterans Affairs (VA) hospitals, used as determined by the Army Blood Program, etc.

(4) Determine the blood and blood products or blood bank services that will be provided to RACH, to other designated military or VA hospitals, or provided otherwise.

5. PERSONNEL. Each Party is responsible for all costs of its personnel, including pay and benefits, support, and travel. Each Party is responsible for supervision and management of its personnel.

6. FINANCIAL DETAILS. This MOA does not document nor provide for the exchange of funds or manpower between the Parties nor does it make any commitment of funds or resources. If these conditions should change, the MOA will be formally amended in writing and signed by the Parties beforehand.

7. GENERAL PROVISIONS.

a. **Effective Period:** This MOA is effective on the date signed by all Parties hereto and expires nine years from the effective date.

b. **Review/Modification/Termination:**

(1) The Director, Army Blood Program must review and approve this MOA before final signature. After all signatories have signed it, the RMC Blood Manager shall duplicate the document, maintain the original, and provide copies to all signatories.

(2) The Parties will review this MOA triennially in its entirety. The Parties may modify this agreement by written agreement, duly signed by their authorized representatives. Any party may terminate this agreement by giving at least 90 days written notice to the other Parties. The Parties may terminate this agreement at any time by mutual written consent. In case of mobilization or other emergency, this agreement will remain in force only within the suppliers' capabilities.

(3) Upon termination of this agreement, RACH and the OBI shall reconcile the credit account. When a positive credit balance exists upon termination, they shall use a draw-down to reduce the credit balance to zero.

(4) Failure to comply with the conditions and procedures outlined in this MOA may result in immediate termination of the agreement.

c. Cancellation of Previous Agreement: This MOA cancels and supersedes the previously signed agreement between the same Parties with the subject Civilian Blood Collection Agency Collecting Blood on Fort Sill and effective date of 11 March 2011.

d. Disputes: Any disputes relating to this MOA will, subject to any applicable law, Executive Order, Directive or Instruction, be resolved by consultation between the Parties or elevated through their respective chains of command for resolution per DODI 4000.19.

e. Transferability: This MOA is not transferable except with the written consent of the Parties.

f. Entire Agreement: It is expressly understood and agreed that this MOA embodies the entire agreement between the Parties regarding the MOA's subject matter.

g. Functional Points of Contact (POCs):

(1) USAG:

(a) PAO. Mr. Jeffrey Crawley, Media Chief, Public Affairs Office, 455 McNair Avenue, Suite 118, Fort Sill, OK, 73503, (580) 442-2384 or e-mail jeffrey.s.crawley.civ@us.army.mil.

(b) MOA POC. Ms. Winona Morris, Garrison Support Agreements Manager (SAM), Manpower and Agreements Division, Resource Management Office (RMO), 909 NW Hamilton Road, Suite 112, Fort Sill, OK, 73503-9004, (580) 442-3560 [Bldg. 467], fax ext. 7978, e-mail winona.f.morris.civ@,mail.mil or Ms. Carleen Pilcher, Agreements Analyst, (580) 442-3111, carleen.l.pilcher.civ@mail.mil.

(2) RACH:

(a) Ms. Sue Croft, Support Agreements Manager (SAM), USAMEDDAC (MCUA-RMA), 4301 Wilson Street, Fort Sill, OK, 73503, (580) 558-2047, fax, (580) 558-2057, DSN 495, or e-mail: brenda.s.croft.civ@mail.mil.

(b) RACH Lab Manager, (MCUA-P), (580) 558-2830, fax, (580) 558-2831, DSN 495.

(3) OBI: Mr. Daren M. Coats, Director. Oklahoma Blood Institute, 1001 N Lincoln Blvd., Oklahoma City, OK 73104, (580) 678-7922, fax (580) 357-2397 or e-mail: Dcoats@obi.org.

(4) USAFCOEFS: Ms. Kay Speegle, Support Agreements Manager, 1655 Randolph Road, Fort Sill, OK 73503, (580) 442-5884, DSN 639, or email: andrea.k.speegle.civ@mail.mil.

8. AGREED.

JOHN B. ARMITAGE, MD
President and CEO
Oklahoma Blood Institute
Oklahoma City, OK

Date: 02042016

KENNETH A. LEMONS
Colonel, US Army
Commanding
USAMEDDAC, Fort Sill

Date: _____

GLENN A. WATERS
COL, FA
Garrison Commander
Fort Sill

Date: 8 MARCH 2016

PAUL S. HOSSENLOPP
COL, GS
Chief of Staff
Fort Sill

Date: 13 MAY 16

REVIEWED AND APPROVED BY:

JOSE F. QUESADA
Lt. Colonel, Medical Service Corps
RMC Blood Manager

Date: 23 Jun 2016

AUDRA L. TAYLOR
Lt. Colonel, Medical Service Corps
Director, Army Blood Program

Date: 23 June 2016

Enclosure

APPENDIX A

OKLAHOMA BLOOD INSTITUTE
RETURN/CREDIT POLICY
FOR BLOOD DONATED ON FORT SILL

Subject to the terms and conditions of this Appendix A, the Customer may return Blood to OBI for full or partial credits as follows:

A. Blood Suitable for Transfusion – With respect to Blood that is suitable for transfusion, Customer may return certain Blood products to OBI for full or partial credit as follows:

1. OBI will not accept for return any nonleukoreduced red blood cells, Autologous blood and components, Directed blood and components, Derivatives, special order products (e.g. whole blood, pediatric units, units with satellite bags attached), frozen components (e.g. FFP, Cryo) except as set forth in Section B of the Appendix A.

2. The Customer may not routinely return any platelet products that are suitable for transfusion. OBI may accept returns of platelets in exceptional circumstances at the sole discretion of OBI.

OBI shall determine which Party is responsible for shipping costs associated with such returns.

B. Damaged Blood – If Blood arrives to the Customer: (1) in a damaged condition, or (2) in a condition rendering the Blood unsuitable for transfusion, then Customer may return such Blood to OBI (or discard the Blood upon OBI's request) for full or partial credit. OBI shall maintain responsibility for any shipping cost associated with such returns.

C. Recalled or Withdrawn Blood – In the event: (1) OBI exercises its right under this Agreement, or (2) the FDA or other regulatory agency requires OBI to withdraw or recall Blood, Customer shall return the Blood to OBI in accordance with Section D of this Appendix A. OBI shall maintain responsibility for any shipping costs associated with such returns.

D. Reporting and Documentation of Returns – All shipments of returned Blood must be preauthorized by contacting RACH's Blood Bank Supervisor or Laboratory Manager. The individual completing the Return Authorization Form certifies: (1) the returned Blood has not been out of control of the Customer's blood bank, (2) the Blood has been continuously stored at the appropriate temperature IAW the Code of Federal Regulations, and (3) Customer has examined the Blood and found it satisfactory for issue. Failure to obtain pre-authorization for each unit of returned Blood may result in refusal to credit Customer for the return of such Blood.

E. Storage Requirements – In order to return Blood that is suitable for transfusion, Customer shall always:

1. Store whole blood and red blood cells between 1° - 6° C; Platelet products at 20° to 24° C with constant agitation; and Frozen plasma products at -18° C or colder.

2. Maintain control over access to the Blood and/or Blood Products and authorization to remove the Blood and/or Blood Products.

3. Utilize storage devices that are capable of maintaining proper storage temperature.

4. Continuously monitor storage temperatures for all Blood Products. If a continuous monitoring device is not used, temperatures must be recorded every 4 hours. This includes platelets stored at room temperature.

5. Ensure refrigerators and freezers have alarm systems. Alarm activation shall initiate an immediate investigation and appropriate corrective action.

6. Ensure a minimum of three (3) segments remain on the unit. If the unit was received by the customer with three or less segments, the three segment requirement is waived.

7. Ensure Red Blood Cell products (including special antigen typed units) have 10 days remaining shelf-life. Red Cell products which are shipped to the customer with 10 days or less remaining shelf-life will be allowed to be returned for credit unless it was a special order for immediate use (e.g. "stat" or "to give"). Units with special testing or processing requested by the customer (e.g. CMV, irradiation, special Ag typing) may be returned and credit will be issued for the unit only – credit will not be issued for the special testing and/or processing.

F. Amount of Credit/Refund – Under no circumstances shall OBI refund Customer an amount exceeding the original Fee paid by Customer to OBI. In the event OBI charges the Customer restocking or shipping fees for the return of Blood that is suitable for transfusion, such charges shall be deducted from the credit owed by OBI to the Customer.

G. Temperature Monitoring Devices – Under no circumstances shall OBI provide credit to Customer for the return of any Blood (suitable for transfusion) if a temperature monitoring device has been affixed to the product. Such devise must be removed by Customer before returning the Blood to OBI. OBI shall not be liable for Blood that is damaged by Customer during the removal of a temperature monitoring device.

H. Compliance – Customer shall comply with the requirements of the Code of Federal Regulations as related to the storage of Blood.

I. Restocking Fee – OBI shall charge Customer a restocking fee of $15.00 for each Blood unit returned to OBI that is suitable for transfusion.

BLOOD COMPONENTS

1. Red Blood Cells (RBCs)
2. Apheresed Platelets (PLAP)
3. Apheresed Fresh Frozen Plasma (AFFP)
4. Cryoprecipitate (AFFP-CRYO)
5. Platelets, Random Donor (PLTs)
6. Other Components as Requested and Available Such as Leukocyte Depleted Products, CMV Negative RBCs, Neonate Units (CMV Negative, 2 Days Old), Irradiated Products, Deglycerolized RBCs, HLA Matched, Etc.

DEBIT ACCOUNT

The following chart lists the credits that will be provided for each unit of blood and blood product provided under the credit provisions of the blood collection MOA. Blood and blood product credits will accumulate at a rate of one unit value for each unit of whole blood drawn on Fort Sill by Oklahoma Blood Institute. The Regional Medical Center Blood Manager, working in conjunction with the RACH Blood Bank Officer and/or Laboratory Manager, will determine the dispersal of these units.

Debits	Blood Components
1.0	1 RBCs
1.0	1 Auto/Directed Donations
0.5	1 PLTS
1.0	1 LFRBC
2.0	1 AFFP-CRYO
2.0	1 AFFP
2.0	1 RBC with Phenotype
7.0	1 PLAP
8.0	1 Leukodepleted PLAP
0.5	ABO Rh (01A)
1.0	Cell Pretreatment (L14)
1.0	Serum Pretreatment (L13)
1.0	Antibody Titer (L07)
1.0	Antibody Screen (L03)
1.0	Antibody ID (L04)
0.5	Antigen Negative Units per Antigen

NOTE: The shipment of blood components to military hospitals within the region other than RACH will require 1 credit for every box shipped.