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1. DETAILS OF THE REQUESTING HOSPITAL OR CENTRE

Requesting Dr. (full name)

Department **Implanting centre**

Address

Postcode Town/City

Phone no. Email address

Address of delivery

Postcode Town/City

Billing centre

Phone no. Email address

CIF (Tax ID code) Contact person

Policyholder/Policy no.

Authorization Order no./Purchase order

2. RECIPIENT DETAILS

Full name **Medical history no.**

Age Diagnosis

3. INTERVENTION

Date Time Place/Operating theatre

4. TISSUE SPECIFICATIONS

Particulate grafts

	Amount		Amount
<input type="checkbox"/> BT1009 CAN2 - Cancellous in 2 cc chips	<input type="text"/>	<input type="checkbox"/> BT3004 CAN_CUB5 - Sponge in cubes 5 cc	<input type="text"/>
<input type="checkbox"/> BT1010 CAN5 - Cancellous in 5 cc chips	<input type="text"/>	<input type="checkbox"/> BT3006 CAN_CUB10 - Sponge in cubes 10 cc	<input type="text"/>
<input type="checkbox"/> BT3011 CAN10 - Cancellous in 10 cc chips	<input type="text"/>	<input type="checkbox"/> BT3005 CAN_CUB15 - Sponge in cubes 15 cc	<input type="text"/>
<input type="checkbox"/> BT3012 CAN15 - Cancellous in 15 cc chips	<input type="text"/>	<input type="checkbox"/> BT3007 CAN_CUB30 - Sponge in cubes 30 cc	<input type="text"/>
<input type="checkbox"/> BT3013 CAN30 - Cancellous in 30 cc chips	<input type="text"/>	<input type="checkbox"/> BT1020 GCAN 0.5 - Min. canc. bone powder 0.5 cc	<input type="text"/>
<input type="checkbox"/> BT3026 CE5 - Corticocancellous in 5 cc chips	<input type="text"/>	<input type="checkbox"/> BT1016 Mineral. cort. powder 0.5 cc (0.25-0.85 mm)	<input type="text"/>
<input type="checkbox"/> BT3027 CE10 - Corticocancellous in 10 cc chips	<input type="text"/>	<input type="checkbox"/> BT1017 Mineral. cort. powder 0.5 cc (0.5-0.85 mm)	<input type="text"/>
<input type="checkbox"/> BT3028 CE15 - Corticocancellous in 15 cc chips	<input type="text"/>	<input type="checkbox"/> BT1002 Mineral. cort. powder 1 cc (0.25-0.85 mm)	<input type="text"/>
<input type="checkbox"/> BT3029 CE30 - Corticocancellous in 30 cc chips	<input type="text"/>	<input type="checkbox"/> BT1018 Mineral. cort. powder 1 cc (0.5-0.85 mm)	<input type="text"/>
		<input type="checkbox"/> BT1004 Mineral. cort. powder 2 cc (0.25-0.85 mm)	<input type="text"/>
		<input type="checkbox"/> BT1019 Mineral. cort. powder 2 cc (0.5-0.85 mm)	<input type="text"/>

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4. TISSUE SPECIFICATIONS (continued)

Bone fragments

	Amount		Amount
<input type="checkbox"/> BT1006 CUBE - Cancellous cube (1 x 1 x 1 cm)	<input type="text"/>	<input type="checkbox"/> BT3041 CL12 - Can. in cylindrical block (D=12 mm)	<input type="text"/>
<input type="checkbox"/> BT3023 CANBLOCK1.3 - Can. block (1.3 x 1.3 x 3 cm)	<input type="text"/>	<input type="checkbox"/> BT3042 CL14 - Can. in cylindrical block (D=14 mm)	<input type="text"/>
<input type="checkbox"/> BT3024 CANBLOCK1.5 - Can. block (1.5 x 1.5 x 3 cm)	<input type="text"/>	<input type="checkbox"/> BT3043 ID14 - Corticocancellous in cylindrical block	<input type="text"/>
<input type="checkbox"/> BT3025 CANBLOCK2.0 - Can. block (2 x 2 x 3 cm)	<input type="text"/>	<input type="checkbox"/> BT3045 FRAG_ESP_P_L - Small corticocan. fragment	<input type="text"/>
<input type="checkbox"/> BT3015 ICW2 - Iliac crest tricortical (1.2 x 3 cm)	<input type="text"/>	<input type="checkbox"/> BT3022 FC - Freeze-dried femoral condyle	<input type="text"/>
<input type="checkbox"/> BT3016 ICW5 - Iliac crest tricortical (1.5 x 3 cm)	<input type="text"/>	<input type="checkbox"/> BT3002 FH - Freeze-dried femoral head	<input type="text"/>
<input type="checkbox"/> BT3017 ICW8 - Iliac crest tricortical (1.8 x 3 cm)	<input type="text"/>	<input type="checkbox"/> BT3020 FSSP - Femoral cortical plate (2 x 12 cm)	<input type="text"/>
<input type="checkbox"/> BT3018 ICW2-0 - Iliac crest tricortical (2 x 3 cm)	<input type="text"/>	<input type="checkbox"/> BT3021 TSSP - Tibial cortical plate (1.5 x 10 cm)	<input type="text"/>
<input type="checkbox"/> BT3019 ICW2 - 6 - Iliac crest tricortical (2 x 6 cm)	<input type="text"/>	<input type="checkbox"/> BT3044 FIBSP - Fibula shaft fragment	<input type="text"/>
<input type="checkbox"/> BT1011 IS - Iliac crest strip bicortical (2 x 2 cm)	<input type="text"/>		
<input type="checkbox"/> BT3014 IS2.6 - Iliac crest strip bicortical (2 x 6 cm)	<input type="text"/>		

Soft grafts

	Amount		Amount
<input type="checkbox"/> BT1007 PFLS - Perio fascia lata (2.5 x 2.5 cm)	<input type="text"/>	<input type="checkbox"/> BT3010 FLL - Large fascia lata (>70 cm ²)	<input type="text"/>
<input type="checkbox"/> BT1008 FLR4.4 - Fascia lata (4 x 4 cm)	<input type="text"/>	<input type="checkbox"/> BT3031 PERIM - Medium pericardium (3 x 5 cm)	<input type="text"/>
<input type="checkbox"/> BT3008 FLR - Fascia lata (6 x 6 cm)	<input type="text"/>	<input type="checkbox"/> BT3030 PERIL - Large pericardium (6 x 6 cm)	<input type="text"/>
<input type="checkbox"/> BT3009 FLM - Medium fascia lata (3 x 15 cm)	<input type="text"/>		

Deminerlized grafts

	Amount		Amount
<input type="checkbox"/> BT1001 DGC0.5 - Demin. cort. bone powder 0.5 cc	<input type="text"/>	<input type="checkbox"/> BT1012 DBMPutty 1 cc - Demin. bone matrix 1 cc	<input type="text"/>
<input type="checkbox"/> BT1003 DGC1 - Demin. cort. bone powder 1 cc	<input type="text"/>	<input type="checkbox"/> BT1013 DBMPutty 2.5 cc - Demin. bone matrix 2.5 cc	<input type="text"/>
<input type="checkbox"/> BT1005 DGC5 - Demin. cort. bone powder 5 cc	<input type="text"/>	<input type="checkbox"/> BT1014 DBMPutty 5 cc - Demin. bone matrix 5 cc	<input type="text"/>
		<input type="checkbox"/> BT1015 DBMPutty 10 cc - Demin. bone matrix 10 cc	<input type="text"/>

Remarks

- I hereby state that I know and meet all the stipulations of Royal Decree Law 9/2014 on the use of human tissues for transplantation.
- I agree to provide information to the bank issuing the tissue on incidents related to the transplantation and its course.

Transplanting physician's medical licence no.

Date

Signature

The cost of transportation shall always be borne by the applicant.