Barcelona Tissue Bank
BANC DE SANG I TEIXITS

REQUEST FOR
FRESH OSTEOCHONDRAL TISSUE

Send by email to **bt@bst.cat**

1. DETAILS OF THE REQUESTING HOSPITAL OR CENTRE

Implanting centre

Requesting Dr. (full name) | Department

Address

Postcode | Town/City

Phone | Email

Address of delivery

Postcode | Town/City

Billing centre

Phone | Email

CIF (Tax ID code) | Contact person

Policyholder/ Policy No.

Authorization | Order No./ Purchase order

2. RECIPIENT DETAILS

Full name | **Medical history No.**

Age | Diagnosis

Height | Weight | Sex | CIP / ID card

3. SURGERY

At the time the tissue is generated, we will inform you about the period of time during which the surgery can be performed. Any change in your availability for surgery (due to the patient or the hospital) must be reported to bt@bst.cat.

4. TYPES OF TISSUE (All these tissues will be generated on demand)

- ☐ **BT2300** Fresh patella (33 ºC)
- ☐ **BT2301** Fresh femoral trochlea (33 ºC)*
- ☐ **BT2302** Fresh patella + femoral trochlea (33 ºC)*
- ☐ **BT2303** Fresh femoral condyle (33 ºC)
- ☐ **BT2304** Fresh tibial plateau with meniscus (33 ºC)
- ☐ **BT2305** Fresh tibial plateau (33 ºC)
- ☐ **BT2306** Femoral condyle + meniscus with tibial plateau fresh (33 ºC)
- ☐ **BT2307** Femoral trochlea + meniscus with tibial plateau fresh (33 ºC)*
- ☐ **BT2308** Fresh distal tibia (33 ºC)
- ☐ **BT2309** Fresh talus (33 ºC)
- ☐ **BT2310** Fresh femoral head (33 ºC)
- ☐ **BT2311** Fresh distal third humerus (33 ºC)
- ☐ **BT2312** Fresh humeral head (33 ºC)

*Grafts containing "femoral trochlea" include the distal part of the femur (trochlea and condyles).

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Additional comments: Indicate the laterality of the requested tissue, as well as other specifications that you consider necessary for donor-recipient correlation (tissue size, percentage of accepted variability, size and location of the lesion, etc.).

1. 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.
2. I agree to provide information to the bank issuing the tissue on incidents related to the transplantation and its course.

Physician's medical licence No.

Signature

Date

The shipping costs must always be assumed by the applicant.

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