

ORDER FORM FOR PLASMA PROTEIN AND RELATED PRODUCTS
REQUIRING CONTRACTS



ALL ORDERS MUST BE FAXED

Site: > _____

Hospital/Customer: _____ Phone /Fax: _____ Date: _____ Time: _____

City/Town: _____ Requested By: _____

Delivery Priority: Routine ASAP *STAT [*STAT orders must be faxed and phoned]

Delivery Mode: _____ Date Needed: _____ Ship to Location: _____

CONTRACT NUMBER: _____

- **Initial requests** ensure the appropriate request form for the product specified is provided
- **Urgent initial requests** for **Panhematin** do not require a contract
- **ONLY one contract number per order form can be accepted**

CBS Code	Product/Manufacturer	Vial Size	Number of Vials	To Be Filled (For CBS Use Only)
Monoclonal Antibody				
1000107699	Hemlibra®, emicizumab, Roche	30 mg/1mL		
1000107700	Hemlibra®, emicizumab, Roche	60 mg/0.4 mL		
1000107701	Hemlibra®, emicizumab, Roche	105 mg/0.7mL		
1000107702	Hemlibra®, emicizumab, Roche	150 mg/1mL		
Hemin for Injection				
1000107704	Panhematin®, Recordati Rare Diseases Canada	268 mg		
Alpha-1 Proteinase Inhibitor				
1000109400	Glassia, Takeda	1000 mg/ 50 mL		
Other Product				

Comments:

Order Forms can be found at <https://www.blood.ca/en/hospitals/submitting-product-orders>

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For CBS Use Only Sales order # _____ Order Entered by (Initials) _____ Date _____

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Canadian Blood Services Site Contact Information

CBS SITE	PHONE NUMBER	FAX NUMBER
British Columbia	604-876-7219	604-879-6669
Brampton	1-877-229-6433	1-888-334-4554
Calgary	403-410-2737	403-410-2791
Dartmouth	1-855-352-5663 local 902-480-5678	1-855-305-6904 local 902-480-5677
Edmonton	780-431-0777	780-433-4478
Newfoundland & Labrador	1-800-838-6101 local 709-758-8072	709-758-5322
Ottawa	613-560-7212	613-560-7199
Regina	306-347-1606	306-347-1551
Winnipeg	204-789-1034	204-774-2956
Head Office (External Customers)	613-761-3301	613-739-2160

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