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<th>CAVN Requested</th>
<th>Other (specify)</th>
<th>RBC + Plasma</th>
<th>RBC Only</th>
<th>(mmu/FHL)</th>
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</tbody>
</table>

**HISTORIC OF DONOR**

- Date of Birth
- Relation to Recipient
- Blood Type
- Gender:
  - Male
  - Female
- Date of Death
- Education/Training

OTHER ANATECTICAL AND GENETIC INFORMATION

- Date of Birth
- Race
- Gender:
  - Male
  - Female
- Information Reconciliation with Reference (Parental, Genetic Information)

CNS COPY