

**REQUEST FOR RECORDS DISPOSITION AUTHORITY**

*(See Instructions on reverse)*

LEAVE BLANK

JOB NO.

*NI-AFU-91-2*

DATE RECEIVED

*10-9-90*

**TO: GENERAL SERVICES ADMINISTRATION  
NATIONAL ARCHIVES AND RECORDS SERVICE, WASHINGTON, DC 20408**

1. FROM (Agency or establishment)

DEPARTMENT OF THE AIR FORCE

2. MAJOR SUBDIVISION

Directorate of Information Management

3. MINOR SUBDIVISION

Policy Division, SAF/AAIA

4. NAME OF PERSON WITH WHOM TO CONFER

Mr. R. P. Dwyer

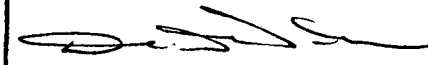
5. TELEPHONE EXT.

703-614-3494

DATE

*10/18/90*

ARCHIVIST OF THE UNITED STATES



In accordance with the provisions of 44 U.S.C. 3303, the disposal request, including amendments, is approved except for items that may be marked "disposition not approved" or "withdrawn" in column 10. If no records are proposed for disposal, the signature of the Archivist is not required.

**6. CERTIFICATE OF AGENCY REPRESENTATIVE**

I hereby certify that I am authorized to act for this agency in matters pertaining to the disposal of the agency's records, that the records proposed for disposal in this Request of 2 page(s) are not now needed for the business of this agency or will not be needed after the retention periods specified; and that written concurrence from the General Accounting Office, if required under the provisions of Title 8 of the GAO Manual for Guidance of Federal Agencies, is attached.

A. GAO concurrence:  is attached; or  is unnecessary.

B. DATE

28 SEP 1990

C. SIGNATURE OF AGENCY REPRESENTATIVE

*Grace T. Rowe*

D. TITLE GRACE T. ROWE

Chief, Records Mgmt Policy Branch  
Directorate of Information Mgmt

7. ITEM NO

8. DESCRIPTION OF ITEM  
*(With Inclusive Dates or Retention Periods)*

9. GRS OR SUPERSEDED JOB CITATION

10. ACTION TAKEN  
*(NARS USE ONLY)*

- LABORATORY RECORDS (Table 160-3)  
(Applicable Air Force-wide)
- 1 Rule 3.1. Changed the disposition of blood transfusion forms (third copy) to "file in outpatient record" vice "destroy upon receipt of 2nd copy with transfusion data section completed." Reason is that atypical antibodies may be identified (especially in the case of prenatal workups) and recorded in the inpatient records at the time of transfusion, but this recording is not reflected in the outpatient records used in routine patient care. This form in the outpatient record is especially important if a patient subsequently needs a blood transfusion.
  - 2 Rule 4. Changed the disposition of blood donor and blood bank records to "destroy after 10 years" vice "destroy after 7 years if no longer required for patient treatment data." Reason is due to the long lead time necessary for antibodies to appear after exposure to the virus and the extensive look-back procedure for the Human Immunodeficiency Virus (HIV). This disposition change also reflects the recommendations of the civilian blood bank regulatory and accrediting agencies. We also changed the description of these blood donor and blood bank records in order to delete duplicate words.

NC1-AFU-77-40

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**TABLE 160-3**

**LABORATORY RECORDS**

R U L E	A	B	C	D
	If records are	consisting of	which are	then
3 .1	blood transfusions	SF 518 3d copy retained when product is issued with 1st and 2nd copies	laboratory copies	*file in outpatient record.
4	*blood donor medical histories and blood bank agreements	*Blood Donor Record (DD Form 572) recording reactions and disposition of blood donors, Shipping Inventory of Blood Products (DD Form 573), blood donor and blood bank processing records and ledgers, investigation and findings of each transfusion reaction investigation, quality control test results and lot numbers of reagents used, issue and receipt for blood products issued, ledgers recording processing of each transfusion request, local agreements/contracts with civilian blood banks	*laboratory copies	*destroy after 10 years.

Blood Transfusion (SF 518)