**AATB Quality Management Case Submission Form**

**– Quality/Donor Suitability Workshop 2015**

|  |  |
| --- | --- |
| **Case submitted by**  (your name and email address) |  |
| **Is the Case….** | **Real or Invented** (delete one) |
| **Your Eye/Tissue Bank’s Name** |  |

|  |  |
| --- | --- |
| **Tissues involved** (e.g., ocular, heart for valves, skin, MS, vascular) |  |
| **Description of the event that challenged your Quality System** |  |
| **Describe why this case was challenging** |  |
| **Was the tissue involved finally released for clinical use?** (if the case is real) |  |
| **Is it now considered that the correct decisions were made?** (if the case is real) |  |
| **What were the key learning points of the case?** |  |
| **Did any policies/procedures change as a result of the review of this case?** (describe) |  |

|  |  |
| --- | --- |
| **Are you willing to present this case and its outcome at the session occurring in Atlanta?** Provide the name and email address of someone from your organization who will present it, or indicate that it should be presented by one of the workshop facilitators and be “anonymous.” |  |
| **We would like to write up these case studies and publish them on the AATB or EBAA website at a future date. Please indicate if you would be amenable to this case being included** (individual banks will not be identified). |  |

**Send completed forms to Scott Brubaker** [**brubakers@aatb.org**](mailto:brubakers@aatb.org?subject=2015%20QDSW%20Quality%20Case%20Study%20Submission)