

DATE REQUESTED: _____ REQUESTED BY: _____

CLIENT NAME: _____ PHONE NUMBER: _____

CLIENT ADDRESS: _____

DESCRIPTION	QUANTITY ORDERED	QUANTITY ISSUED	DESCRIPTION	QUANTITY ORDERED	QUANTITY ISSUED
			FORMS		
Serum Separator Tube 7.5ml <input type="checkbox"/>			General Requisition		
Lavender Top (EDTA) 3ml <input type="checkbox"/> 4ml <input type="checkbox"/>			Histology/Biopsy Requisition		
Gray Top (Sodium Fluoride/Potassium Oxalate) 5ml <input type="checkbox"/>			Cytology Requisitions		
Blue Top (Sodium Citrate) 2.7ml <input type="checkbox"/>			Chain of Custody Form		
Yellow Top (ACD) <input type="checkbox"/>			Sign-In Sheets		
Red Top (Plain) 7ml <input type="checkbox"/>			Maternal Screen		
Dark Blue (Sodium Heparin) <input type="checkbox"/>			Supply Requisition Form		
			HIV Consent Form		
			LABORATORY SUPPLIES		
			Biopsy Bottle w/Formalin		
Needles(Multisample)2lg 1 1/2"(100/Box) <input type="checkbox"/>			Thin Prep Vials		
Needle Holder (250/Bag) <input type="checkbox"/>			Cyto Spatulas <input type="checkbox"/> Brushes <input type="checkbox"/> Brooms <input type="checkbox"/>		
			Cyto Collection jars		
			TRANSFORMED		
			DNA Gen-Probe / Viral Culture M4 Kit		
C&S Urine Tube-Gray Top / Transfer Straw			DVA and Parasite Vials		
Sterile Kits (UA & C&S)			Stool C&S Vials		
24 Hr Urine Jug			Non-Sterile Cups for C diff		
			Blood Culture Bottles Adult <input type="checkbox"/> Ped <input type="checkbox"/>		
			Swab, Transport - Red		
			Swab, Transport - Blue		
Transfer Tubes and Caps					
BioHazard-Specimen Bags			Zebra Labels (Cerner)		
			Dymo Labels (Atlas)		
			STAT Labels		
			LABORATORY SUPPLIES		
Drug Screen Cups / Secure Tape			Glucose Tolerance Beverage (Orange Flavor)		
Med Tax Kits			Tourniquet		
Split Container w/Bag & Security Seal			Specimen Hats		
Chain of Custody Bags w / Security Seal			Printer Ribbon/Toner Cartridge		
			Cartridge #		
			Lockbox		

Your request may be adjusted. The types and amounts delivered to you are based on the specimens you normally send to St. Elizabeth. As part of its on-going compliance program, St. Elizabeth will not provide any supply that is reusable or has a clear and independent value to you. Please Fax your order to: Brenda Pettit 859-301-5560

Time & Date Completed: _____ Date & Time of Delivery: _____

