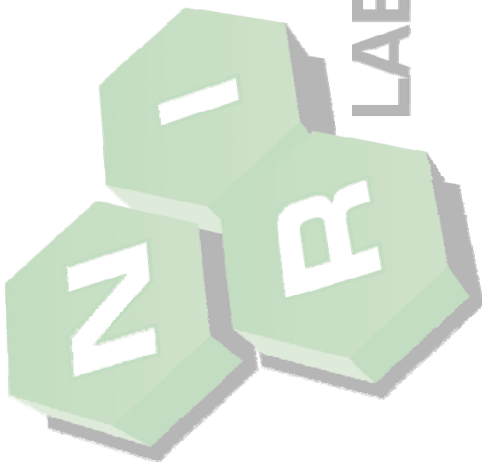


Supply Request Form



LABORATORIES, INC

Facility Account #: _____ Phone #: _____ Date: _____

Address: _____

Order Requested By: _____
 Print Name Sign Name

* The supplies provided are solely to be used for the collection and preparation of samples that are being sent to **NRI Laboratories, Inc.**

Quantity Requested	Specimen Collection	Quantity Shipped
	Tubes	
Pk	Red Top (SST)	
Pk	Lavender Top (EDTA)	
Pk	Gray Top (Na Fluoride)	
Pk	Blue Top (Na Citrate)	
Ea	Yellow Top (ACD) glass	
	Urine	
Ea	Tubes with plastic cups (3.5oz)	
Ea	Sterile Cups (for Urine Culture, C. Difficile, Stool Collection)	
Ea	24 Hr Container	
	Swab	
Ea	Regular Swab (Throat, Vaginal, Bacterial Culture) <i>GC/Chlamydia (B-D Pink/Blue unit)</i>	
Ea	Female (Endocervical) Pink	
Ea	Male (Urethral) Blue	
Ea	Viral Transport Media – Culture Herpes (Refrigerated) with Applicator	
	Kits - PAP	
Ea	PAP Smear Collection Kit (Conventional)	
Ea	PAP Collection Kit (Thin Prep - with spatula and cytobrush)	
Ea	Biopsy Bottle w/Formalin	
	Kits - Stool	
Ea	For Enteric culture – ParaPak stool C&S (Orange vial)	
Ea	For Ova & Parasite – ParaPak ECOFIX (Green Cap vial)	
Ea	Blood Culture Bottles	
	Needles	
Bx	21g X 1 ½	
Bx	22g x 1	
	Forms	
Ea	Laboratory Request Form	
Ea	Supply Request Form	
Ea	Pathology Request Form (UIMC)	
	Misc	
Pk	Cotton Balls	
Bx	Alcohol Preps	
Pk	Band-Aids	
Ea	Vacutainer Holder	
Ea	Specimen Bag	
Ea	Tourniquets	
Ea	Glucose Tolerance Test Beverage	
	Other - Special Requests	

Office Use Only Route #: _____

Order Received By: _____ Date: _____