



LAB SUPPLY ORDER REQUEST FORM

ACCOUNT NAME _____ DATE _____

Indiana Regional Medical Center Laboratory provides supplies that the client requires to collect specimens to be sent to IRMC Laboratory for analysis. **ALL** of the supplies provided can only be used for specimens that are returned for testing to IRMC Lab. Please indicate those supplies you need. Supplies are delivered **within 48hrs** from order receipt in lab; Monday - Friday. The online LAB CATALOG includes supply order forms that can be printed at <http://irmc.testcatalog.org/> Questions (724) 357- 7160. You are a valued customer and we appreciate the opportunity to serve your needs.Thank you !

Description	UNIT	QUANTITY	LOCATION	Description	UNIT	QUANTITY	LOCATION
REQUEST FORMS				BAGS			
CLINICAL LABORATORY ORDER SHEET	PKG	_____	STORE	SPECIMEN BAGS- (SMALL)	EA	_____	PATSRV
CYTOLOGY/ PATHOLOGY ORDER SHEET	PKG	_____	STORE	LG SPECIMEN BAGS (For Courier Transport of Lab Spec.)	EA	_____	PATSRV
DERM PATHOLOGY ORDER SHEET	PKG	_____	STORE				
GYN/ OB ORDER SHEET	PKG	_____	STORE				
LAB SUPPLY ORDER FORMS	PKG	_____	ONLINE				
LAB REMOTE PRINTER PAPER	CS	_____	FORMS				
SPECIMEN LABELS, RED & WHITE	PKG	_____	PATSRV	CYTOLOGY / PATHLOGY			
OKIDATA RIBBON- LAB REMOTE PRINTER	EA	_____	STORE	THIN PREP VIALS (BOX OF 25) [for HPV also]	BX	_____	CYTO
LAB REMOTE LABEL PRINTER LABELS	ROLL	_____	STORE	THIN PREP VIALS (BAG OF 7) [for HPV also]	BAG	_____	CYTO
				BRUSHES/SPATULAS for PAP SMEARS (25 in pkg)	PKG	_____	CYTO
				BROOMS for PAP SMEARS (25 in pkg)	PKG	_____	CYTO
				FORMALIN CUPS (box of 25) or (box of 75)	BX/25/75	_____	HISTO
				GLASS SLIDES for FNAs (box of @75)	BOX	_____	HISTO
				PLASTIC SLIDE HOLDERS for FNAs	EA	_____	HISTO
				10 ml FALCON TUBES orange cap for needle wash (box of 50)	BOX	_____	HISTO
TUBES							
LIGHT GREEN- PST -LITHIUM HEPARIN	PKG	_____	PATSRV				
LAVENDER TOP TUBES -4 ML	PKG	_____	PATSRV	MICROBIOLOGY			
PLAIN RED TOP TUBES - 10ML	PKG	_____	PATSRV	CULTURETTE SWAB (BLUE)-Wound, Aerobic/Anaerobic	EA	_____	MICRO
(PLASTIC) SST VACU+ (Marble top)	PKG	_____	PATSRV	CULTURETTE SWAB (RED) - Throat, Rapid Strep, Nose,	EA	_____	MICRO
BLUE TOP TUBES, 1.8ML	PKG	_____	PATSRV	Anterior Nares MRSA PCR , Urethrogenital C&S			
GOLD TOP - 3.5 ML	PKG	_____	PATSRV	MINITIP CULTURETTE, WIRE SWAB (GREEN)-Ear, Urethral	EA	_____	MICRO
GREEN TOP TUBES , SODIUM HEP 10ML	EA	_____	PATSRV	Eye (NOTE: Not for INFLUENZAE FLU AB)			
YELLOW TOP (ACD)	EA	_____	REFLAB	BORDETELLA (BPS) NP CULTURE SWAB (ORANGE)	EA	_____	CHEM
ROYAL BLUE (NO ADDITIVE)	EA	_____	REFLAB	SPUTUM CONTAINERS, AFB	EA	_____	MICRO
ROYAL BLUE- EDTA	EA	_____	REFLAB	BLOOD CULTURE AEROBIC BLUE, ADULT	EA	_____	MICRO
CLEAR GREEN (LITHIUM HEP- 2ML Rpid Fill)				BLOOD CULTURE ANAEROBIC PURPLE ADULT	EA	_____	MICRO
				BLOOD CULTURE PINK- PEDIATRIC	EA	_____	MICRO
				CHLAMYDIA / GC - (Cepheid PCR)	EA	_____	MICRO
NEEDLES / SUPPLIES							
21 G 1 1/2 NEEDLES GREEN	PKG	_____	PATSRV	SPECIMEN TRANSPORT CONTAINER			
22 G 1 NEEDLES BLACK	PKG	_____	PATSRV	INFLUENZA (FLUAB) M4RT	EA	_____	HEMA
ADAPTORS - NEEDLE PRO HOLDERS	BAG	_____	PATSRV	MULTIPROBE MICROTEST TRANSPORT (VIRAL)--			
ADAPTORS - NEEDLE PRO HOLDERS	BOX	_____	PATSRV	(GREEN CAP -Refrigerate) (Virus, Chlamydia, Herpes,			
BANDAIDS	BX	_____	PATSRV	Mycoplasma,Ureaplasma)	EA	_____	SPEC
2x2 GAUZE	PKG	_____	PATSRV	SYNOVIAL FLUID KITS	3/PK	_____	SPEC
ALCOHOL WIPES	BX	_____	PATSRV	APTIMA PCR SWAB FOR EYE CHLAMYDIA (GENE PROBE)	EA	_____	REFLAB
TOURNIQUET	EA	_____	PATSRV				
BUTTERFLY NEEDLE (ONLY IRMC USE)	EA	_____	PATSRV				
(NOT PROVIDED EXCEPT FOR BLOOD CULTURE)							
BETADINE- BLOOD CULTURE PREPS	EA	_____	PATSRV	MISCELLANEOUS			
				PLASTIC TRANSFER PIPETTES (IRMC use)	EA	_____	REFLAB
URINE CONTAINERS				PLASTIC TRANSPORT TUBES AND CAPS (IRMC use)	EA	_____	PATSRV
URINE CUPS-STERILE	EA	_____	PATSRV	LEGAL KITS (ER only)	EA	_____	PATSRV
URINE CUPS, NONSTERILE	EA	_____	PATSRV	DEXICOLA (OB/GYN only)			
CASTILE SOAP TOWELETTES	EA	_____	PATSRV				
URINE DRUG SCREEN CONTAINER	EA	_____	PATSRV				
24 HR URINE CONTAINERS	EA	_____	REFLAB				
24 - Urine PRESERVATIVE - Boric Acid	EA	_____	CHEM				

Order completed by: _____ Date _____

Original: Lab copy - Photocopy: Packing Slip deliver with order

Thank you for completing this supply order promptly. You make a difference!