

SUPPLY REQUISITION

Courier Route: _____

MERITER LABORATORIES

36 S. Brooks St. – Madison, WI 53715

To place an order by phone dial: (608) 417-6529 or (800) 236-0465

To place an order by fax: (608) 417-6393

Please Provide Complete Information

<p>Date: _____</p> <p>Individual Ordering: _____ (please print full name)</p> <p>Facility's Name _____ (please print full name)</p> <p>Telephone: _____</p>	<p>The supplies provided by Meriter Laboratories are solely to be used for the collection and preparation of specimens which are being sent to our Laboratory for testing. Federal regulations prohibit using supplies provided by our company for any other use. Placing orders for and receiving supplies is an acknowledgment of understanding and agreeing to these conditions. ML reserves the right to reduce the number of supplies ordered per client due to previous usage and or expired supply returns.</p> <p>Please allow 3 working days for delivery by courier and 1 week for delivery by mail.</p>
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REQUISITION FORMS

- ____ Client Requisitions [814523](#)
- ____ Histology Requisitions [811587](#)
- ____ Nursing Home Requisitions [OP](#)
- ____ Supply Requisitions [OP 3](#)
- ____ Veterinary Requisitions [OP 24](#)

COLLECTION TUBES

- | #Single | #Flat | |
|---------|-------|---|
| _____ | _____ | Lt Blue 1.8 mL (Na Citrate) Short Draw BD 363080 |
| _____ | _____ | Lt Blue 2.7 mL (Na citrate) BD 363083 |
| _____ | _____ | Lt Green 3 mL (PST Lithium heparin) BD 367960 |
| _____ | _____ | Dk Green 4 mL (Lithium heparin no gel) BD367884 |
| _____ | _____ | Dk Green 6 mL (Sodium heparin no gel) BD 367878 |
| _____ | _____ | Lavender 4 mL (EDTA) BD 367861 |
| _____ | _____ | Navy 6 mL Zinc (Trace No additive) BD 368380 |
| _____ | _____ | Navy 6 mL K2 EDTA (lead testing) BD 368381 |
| _____ | _____ | Pink 6 mL (Blood Bank K3 EDTA) BD 367899 |
| _____ | _____ | Red 4 mL w/ clot activator (No Gel) BD 367812 |
| _____ | _____ | Red 10 mL w/ clot activator (No Gel) BD 367820 |
| _____ | _____ | Gold 4 mL w/ clot activator (SST) BD 367983 |
| _____ | _____ | Yellow 8.5 mL (HLA) (ACD solution A) BD 364606 |
| _____ | _____ | Yellow 6.0 mL (HLA) (ACD solution B) BD 364816 |
| _____ | _____ | Quantiferon TB Gold 4 Tube kit T794 |
| _____ | _____ | Amber SST Microtainer 500 µl BD 365959 |
| _____ | _____ | Lt Green PST Li Hep Microtainer 500 µl BD 365958 |
| _____ | _____ | Lavender Microtainer 500 µL (EDTA) BD 365973 |

COLLECTION CONTAINERS

- _____ Fecal Fat Stool Containers (Test Dependent)
- _____ Serum Transport Vials (with caps) [807785](#)
- _____ Sterile Screw Capped urine cups (90 mL) [807835](#)
- _____ 24 Hour NO PRESERVATIVE Urine Containers [807690](#)

MICROBIOLOGY SUPPLIES

- _____ APTIMA Unisex Swab Specimen Collection Kit for Endocervical and Urethral Swab Specimens [OP 33](#)
- _____ APTIMA Urine Collection Kit for Male and Female Urine Specimens [OP 35](#)
- _____ APTIMA Vaginal Swab Specimen Collection Kit [OP 34](#)
- _____ BBL **single** CultureSwab Collection and Transport System with Liquid Stuart's media [OP 31](#)
- _____ BBL **double** CultureSwab Collection and Transport System with Liquid Stuart's media [OP 32](#)
- _____ BD Universal Viral Transport Media [Micro 13](#)
- _____ Blood Culture Sets Adult (Aerobic, Anaerobic) [442192/442265](#)
- _____ Blood Culture Sets Pediatric (Aerobic) [442194](#)
- _____ ChloraPrep Applicator [Micro 11](#)
- _____ Pertussis PCR (Orange StarSwab) [Micro 6](#)
- _____ Pertussis Regan-Lowe Media [Micro 2](#)
- _____ Stool Collection Transport vial (**ORANGE CAP**) [900612](#)
(Use for Enteric Pathogen PCR Panel)
- _____ Stool Collection Transport vial (**YELLOW CAP**) [900212](#)
(Use for Crypto/Giardia)
- _____ Stool Collection Transport vial (**GREEN CAP**) [901312](#)
(Use for Ova and Parasites)
- _____ A.C.T. II Sterile Culture Transport System (Aerobic, Anaerobic)
(Use for sterile body fluids)

MISCELLANEOUS SUPPLIES

- _____ Fetal Fibronectin Test [00797](#)
- _____ Formalin Bottles Single (20 mL) [Histo 1](#)
- _____ Formalin Bottles Single (40 mL) [Histo 2](#)
- _____ Formalin Bottles Single (60 mL) [Histo 3](#)
- _____ Formalin Bottles Single (120 mL) [Histo 4](#)
- _____ Formalin Carton 24/Box (20 mL) [Histo 5](#)
- _____ Formalin Carton 24/Box (40 mL) [Histo 6](#)
- _____ Formalin Carton 24/Box (60 mL) [Histo 7](#)
- _____ Formalin Carton 24/Box (120 mL) [Histo 8](#)
- _____ Specimen Bags (6 x 9) [811378](#)
- _____ Saliva Cortisol Kits [T514](#)
- _____ OTHER (write in quantity and item)

CYTOLOGY SUPPLIES

Please call Dane County Cytology at 608-255-5135.