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## *Supplies*

Please fill out the supply order form on the following page of this manual. Remember supplies provided to your office must be used exclusively and in proportion to the ordering of laboratory tests provided by Hallmark Health Laboratory Services.

Order for supplies received by Tuesday will be delivered on Friday of the same week.

Completed forms can be returned with courier or faxed to Client Services at 781-979-6066.

Supply Order Form- Side 1



Hallmark Health

Client: \_\_\_\_\_

Office Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date Requested: \_\_\_\_\_

QTY	Items Description	Item #	QTY	Items Description	Item #
	TUBES			PATHOLOGY	
PK	<b>Tubes, SST GOLD</b> 367986 100/pack 5ml	#0021890	PK	<b>Pap Packs</b> 50/pack	
PK	<b>Tubes, SST GOLD</b> 367986 100/pack 3.5ml	#0022189	PK	<b>Pap Requisitions</b>	
PK	<b>Tubes, Plain Red</b> 367815 100/pack 6ml	#0022187	PK	<b>Pathology Requisitions Blue</b>	
PK	<b>Tubes, Lavender</b> 367856 100/pack 4ml	#0022254		<b>Thin Prep Requisition</b>	
PK	<b>Tubes, Dark Green</b> 367871 100/pack 4ml	#0022347		<b>Thin Prep Vials</b>	
PK	<b>Tubes, Pink EDTA Blood Bank</b> 367899 100/pack 6ml	#0022190		<b>Brooms</b>	
PK	<b>Tubes, Blue</b> 363083 100/pack 2.7ml	#0021030		<b>Brushes</b>	
PK	<b>Tubes, Pedi lavender</b> 367841 100/pack 2ml	#0002502		<b>Spatulas</b>	
EA	<b>Tubes, Black (ESR) Cuvette</b> 10205 Each	#0002873		<b>Formalin</b>	
PK	<b>Yellow top ACD Tubes</b> 364816 100/pack 6ml	#0003551		<b>Cyto Spin Containers</b>	
PK	<b>Gray Tube Vacutainer</b> 367925 100/pack 6ml	#0017881			
	NEEDLE SUPPLIES			SHARPS CONTAINERS	
PK	<b>Needles, 21G Eclipse Green</b> 368607 48/pack	#0013284		<b>Auto Drop-Sage (1pt)</b> 8901	#0004496
PK	<b>Needles, 22G Eclipse Black</b> 367608 48/pack	#0013285		<b>Large (2 gal) Sharps container</b> 8970	#0000392
EA	<b>Butterfly Needles Saftey Lok</b> 367283 23G	#0005633		<b>Med Clear (5Qt) Sharps container</b> 851201	#0000394
PK	<b>Holders Vacutainers</b> 364815 250/bag	#0015618		<b>Devon (1Qt) Sharps container</b> 8900	#0000395
PK	<b>Holders Vacutainers Pedi</b> 364899 10/pack	#0002495			

Please remember supplies provided to your office must be used exclusively and in proportion to, the ordering of laboratory test provided by Hallmark Health Laboratory services.

Supply Order Form- Side 2



Hallmark Health

Client: \_\_\_\_\_

Office Address: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Date Requested: \_\_\_\_\_

QTY	Items Description	Item #	QTY	Items Description	Item #
MICRO/CULTURES			MISCELLANEOUS		
EA	<b>Genprobe Aptima Swab</b> 1041 Unixex 50/box	#0019265	EA	<b>Transfer Pipets</b> P521421 500/pack	#0010039
EA	<b>Genprobe Aptima Urine</b> 1040 Urine 50/box	#0019264	EA	<b>Transfer Tubes Polyprop 13X100</b> 20260001	#0015704
EA	<b>Swab Cultures</b> 4320146 50/bag	#0020400	EA	<b>Transfer Tube Cap, flange</b> T122637	#0002854
BAG	<b>Sterile Urine Cup</b> 0210201 75/bag	#0005019	EA	<b>Tourniquets 1x18 Latex, disposable</b> 83060	#0002532
EA	<b>24 Hour Urine Containers</b> 4711	#0000354	PK	<b>Gauze 2x2(non-sterile)</b> 2146 200/pack	#0003881
BOX	<b>OB Towlettes</b> V105102 100/box	#0003980	BOX	<b>Alcohol Pads</b> 9100 200/box	#0000120
EA	<b>M5 Media</b>		PK	<b>Specimen Transport</b> B120916 Biohazard Bags 50/pack	#0000071
FORMS			EA	<b>Plastic Bag Clear Liner: 12x8x24</b> 2037169	#0008288
PK	<b>LDO Registration Forms- Ins. Information</b> 100/pack	#0015685	BOX	<b>Band-aids 1x3</b> 7028 50/box	#0000515
PK	<b>Supply Request Forms (LDO)</b> 100/pack	#0015705	CS	<b>Glucola, Orange</b> B53957A 50 gm 12/case	#0002538
PK	<b>Pre-Admission Testing</b> 100/pack	#0015684	CS	<b>Glucola, Orange</b> B53954A 100 gm 12/case	#0004296
PK	<b>Surgical Consent Forms</b> 100/pack	#0017509	ROLL	<b>Parafilm</b> P11506 2"x 250'	#0002513
	<b>LDO Test Requisitions</b> <input type="checkbox"/> Lab/Imaging		EA	<b>Rhogam Shots</b>	
			EA	<b>Micro Containers EDTA, LAV</b> 365974 50/pack	#0009724
			EA	<b>Micro Containers Serum, Amber</b> 3659589 50/pack	#0004169
				PRINTER SUPPORT SUPPLIES BY LAB	
				Laser Paper	
				Toner Cartridge	
				Toner Reorder #: _____	
				For use in HP LaserJet Printer	
				Model #: _____	

Supply request forms need to be submitted by Tuesday for delivery on Friday of the same week.  
Send the courier or fax completed form to Melrose-Wakefield, Attention: Client Services Fax# 781-979-6066