

OSFMG and OSF OnCall Lab Supply Order Form

Date:		-	
Customer Name:			
Address:		Suite	
City:	Contact #		

Item	Product ID Number	Amt	Ordering Unit of	Amt
Tubes/Needles		Ordered	Measure	Filled
*6 ml navy top EDTA (Na2)	MCL Supply T183		ea / flat	
*6 ml navy top (Plain)	MCL Supply T184		ea / flat	
*7 ml aluminum only tube T713	MCL Supply T713		ea	
*Metal -free aliquot tubes	MCL Supply T173		ea / bag	
*Serotonin tubes	MCL Supply T259		ea	
*Cortisol salivary kit	MCL Supply T514		ea	
*Catecholamine tube	MCL Supply 066		ea	
Fibrinogen Degredation Product (FDP) tube	100654		ea	
tube	100054		ea	
*Z tube	MCL Supply T701		ea	
QuantiFERON PLUS Kit (Note: Occ Health order direct from CSC)				
Treatti order direct from ese;	10310736		kit	
*Amber Frosted Tube 5 mL	MCL Supply T192		ea	

ltem Miscellaneous	Product ID Number	Amt Ordered	Ordering Unit of Measure	Amt Filled
Dermatophyte media	7051		ea	
LacTest 25 gram pouch, LACTOSE	MQD2425		ea	
*Streck kits	MCL Supply T715		ea	
*5 gram sodium carbonate	MCL Supply T272		ea	
*25 ml acetic acid	MCL Supply T008		ea	
*15 ml acetic acid	MCL Supply T558		ea	
OSF Inter Office Shipping Label			ea	

ltem Microbiology	Product ID Number	Amt Ordered	Ordering Unit of Measure	Amt Filled
Pin worm kit	V302PIN		ea	
Copan FecalSwab tube	R723487		ea	
*Ova & Parasite Media (Green top)	MCL Supply T790		ea	
*Aptima urine specimen kit	MCL Supply T582		ea	
*Aptima unisex collection swabs	MCL Supply T583		ea	
*72 hr Fecal fat testing	MCL Supply T291		ea	
*Hair and Nail collection kit	MCL Supply T565		kit	
*Urea Breath kit	MCL Supply T906		kit	

Item Pathology	Product ID Number	Amt Ordered	Ordering Unit of Measure	Amt Filled
ThinPrep Pap Vials	70097-001		flats	
Cytobrush/Spatula Kit	70124-001		Pack of 25	
Broom-Like Collection Device	70101-001		Pack of 25	
Michel Fixative	S2168D-100		ea	
*Urovision FISH testing	MCL Supply T509		ea	

Signature:		

By signing, I certify that all requested supplies will be used soley for the purpose of specimen collection for OSF HealthCare Laboratory samples

All requested supply items will be verified by prior account usage and filled appropriately

Please submit supply requests to: Laboratory **Email** Fax SAMC-Rockford (815) 395-5364 N/A LCMMC-Evergreen Park (708) 499-2337 N/A SFH-Escanaba N/A (906) 786-1424 OSF System Laboratory-Peoria (309) 624-9037 SFMC. Lab. Courier Service Inquiries @ os fhealth care. or general content of the content of t

Note: OSF System Laboratory-Peoria will fill supply orders for clinics not associated with SAMC, LCMMC, SFH

Please DO NOT email supply orders to OSF System Lab Notifications email

^{*} Denotes we obtain the item from Mayo