

Wellspan Laboratory Services Supply Requisition

PHONE: 851-6902 FAX: 851-1443

WELLSPAN FACILITIES

Client: _____ Date: _____

Person Ordering Supplies: _____ Phone: _____

PLEASE ALLOW 5-7 WORKING DAYS FOR DELIVERY

CYTOLOGY/HISTOLOGY

Qty
____ SLIDE HOLDERS
____ 20 ML FORMALIN
____ 40 ML FORMALIN
____ CYTO SCRAPERS
____ CERVICAL BRUSHES
____ THIN PREPS W/BRUSHES
 & SCRAPERS
____ CYTOLYTE

CULTURE SUPPLIES

Qty
____ ANEROBIC SYSTEM
____ VIRAL SWABS (STANDARD)
____ VIRAL SWABS (MINI TIP)
____ OVA & PARASITES VIAL
____ STOOL CULTURE VIAL
 CHLAMIDA / GC SWABS
 (MALE)
 (FEMALE)
____ E SWABS - PERTUSSIS
____ AFFIRM

URINE AND STOOL COLLECTION SUPPLIES

Qty
____ 24 HR STONE RISK BTL.
____ 24 HR URINE INSTRUCT
____ HEMOCCULT ICT
 (Immunochemical Fecal
 Occult Blood)

FORMS/REQUISITIONS

Qty
____ #81 SUPPLY REQUISITION

VENIPUNCTURE SUPPLIES

*ONLY IF DRAWING BLOOD FOR
YORK HOSPITAL*

Qty
____ BLUE TUBES
____ RED TUBES 6 ML
____ GOLD TUBES 5.0 ML
____ GREEN TUBES 6.0 ML
____ GRAY TUBES 2 ML
____ LAV TUBES 3 ML
____ LAV TUBES 6 ML
 (FOR BNP ONLY)

NEEDLES

MULTI SAMPLE

Qty
____ GREEN 21 GAUGE
____ BLACK 22 GAUGE
____ NEEDLE PRO ADAPTER
____ TOURNIQUET

**WELLSPAN FACILITIES
NEED TO ORDER FORMS
AND STOREROOM
SUPPLIES FROM THE
STOREROOM AND HAVE
THEM DELIVERED WITH
THEIR WEEKLY
STOREROOM DELIVERY**

LAWSON ORDER NUMBERS

24 HR URINE BOTTLE	10075
SLIDES	16216
SPRAY FIXATIVE	16397
CULTURETTES	11041
URINE CUPS	11225
TOP HATS	11232
PEDI BAGS	06025
GREEN SOAP	17275
2 GAL SHARPS	10023
SMALL BIO BAGS	11234
LARGE BIO BAGS	11269
PERSONAL BELONGING	10300
URINE CULTURE TUBES	11229

OTHER:

**ALL SUPPLIES FURNISHED BY YORK
HOSPITAL LABORATORY MUST BE RETURNED
TO YORK HOSPITAL FOR PROCESSING**