

**CAP-LAB**  
WWW.CAPLAB.ORG

**Phone: (517) 372-5520 \*\*\* Toll free (877) 372-5520 \*\*\* Fax: (517) 372-5540**

<b>SUPPLY REQUISITION</b>		Client:		
DATE ORDERED:		PLACED BY:		
<b>ITEM # and Description</b>	<b>UNIT OF MEASURE</b>	<b>QUANTITY DESIRED</b>	<b>QUANTITY DELIVERED</b>	<b>COMMENTS</b>
1 CAP-LAB SPECIMEN FORMS	Each			
2 CAP-LAB SUPPLY REQUISITIONS	Each			
3 SPECIMEN/BIOHAZARD BAGS	100/bag			
4 BIOPSY BOTTLES W/FORMALIN 10 ml	32/box			
5 BIOPSY BOTTLES W/FORMALIN 20 ml	150/box			
6 BIOPSY BOTTLES W/FORMALIN 30 ml	75/box			
7 BIOPSY BOTTLES W/FORMALIN 45ml	75/box			
8 10% BUFFERED FORMALIN CUBE	5 gallon			
9 EMPTY CONTAINER/W LID 16 OZ.	each			
10 EMPTY CONTAINER/W LID 32 OZ.	each			
11 EMPTY CONTAINER/W LID 86 OZ.	each			
12 EMPTY CONTAINER/W LID 172 OZ.	each			
13 Specimen Labels (Dr. name imprinted)	Sheet			
14 Urovysion Kit	1/box			
15 Plastic Pap scrapers	50/bag			
16 Surgipath C-E brush-Pap (snap off tip)	100/bag			
17 Cytolyte solution (30 ml. vials)	20/tray			
18 Cytolyte solution (32 oz. bottle)	Each			
<b>THIN PREP PAP SUPPLIES</b>				
19 THIN PREP PAP VIALS	25/tray			
20 THIN PREP BROOMS (lavender or blue with white soft broom end)	25/bag			
21 THIN PREP COMBO KIT (spatula & cytobrush) (Medscand sample collection kit)	25/bag			
<b>SURE PATH PAP SUPPLIES</b>				
22 SURE PATH PAP VIALS	25/tray			
23 SURE PATH BROOM (lavender or blue with white soft push off broom end)	25/bag			
24 SURE PATH BRUSH (blue with push off white thin brush end) (Rover's endocervix brush)	50/bag			
25 SURE PATH SPATULA (blue with white push off end) (Rover's spatula)	50/bag			
26 SURE PATH COMBO KIT (snap-off spatula and cytobrush)	25/bag			
<b>SHIPPING SUPPLIES</b>				
27 Fed Ex billable stamps				
Miscellaneous note below				

<b>CAP-LAB OFFICE USE ONLY</b>		
Order filled by:	Date filled:	Date Supplies sent out:
Date entered on spreadsheet/initials:		