

# Lab Supply Order Form

Date: \_\_\_\_\_

Ordering Location: \_\_\_\_\_

Person Requesting Supplies: \_\_\_\_\_

## Covid Collection Supplies

- VIRAL TRANSPORT MEDIA Qty: \_\_\_\_\_
- NASAL SWABS Qty: \_\_\_\_\_
- NASOPHARYNGEAL SWABS Qty: \_\_\_\_\_

## Stool Collection Supplies

- Para-Pak Transport Media Qty: \_\_\_\_\_
- AlcorFix Transport (O&P) Qty: \_\_\_\_\_

## Misc: Collection Supplies

- HSV Kit Qty: \_\_\_\_\_
- H.Pylori Breathtek Kit Qty: \_\_\_\_\_

**PLEASE FAX COMPLETED FORMS TO 217-258-2384**

**PLEASE ALLOW 48HRS TO PROCESS REQUESTS**