



Associated Pathology Medical Group

Julia Chan, M.D., Carlene Hawksley, M.D., Paula Quinn, M.D.,
Leonard Valentino, M.D., Kenneth Westphal, M.D., Jeffrey Young, M.D.

SUPPLY ORDER

CLIENT INFO		
NAME	ORDER REQUESTED BY	PHONE
ADDRESS		DATE

10% FORMALIN PRE-FILLED TISSUE BIOPSY CONTAINERS		
QTY.	UNIT (Qty.) <i>Check one</i>	DESCRIPTION
	<input type="checkbox"/> Tray (24) <input type="checkbox"/> Case (96)	20/10 ml Formalin Bottles (White Top)
	<input type="checkbox"/> Tray (24) <input type="checkbox"/> Case (96)	40/20 ml Formalin Bottles (White Top)
	<input type="checkbox"/> Tray (24) <input type="checkbox"/> Case (96)	60/30 ml Formalin Bottles (Blue Top)
	<input type="checkbox"/> Each (24) <input type="checkbox"/> Case (96)	90/60 ml Formalin Bottles (White Top)
	<input type="checkbox"/> Each (24) <input type="checkbox"/> Case (96)	120/90 ml Formalin Bottles (White Top)
	<input type="checkbox"/> Each (1) <input type="checkbox"/> Case (12)	250 ml Formalin Bottles (White Top)
	Each	Michel's Fixative (Refrigerate)
	Each	Spray Fixative (1 oz. Bottle)
	Box	Slides (72 Slides per box)
	Each	Plastic Slide Holders – (Holds 5 Slides)
	Pack	Transport Bags – (100 Bags)
	Pack	95% Alcohol-Filled Slide Containers – (Holds 5 Slides)

REQUISITION FORMS		
QTY.	UNIT (Qty.)	DESCRIPTION
	Each	Dermatopathology
	Each	Surgical Histology (White)
	Each	Surgical Histology (Blue – Dominican Hospital)
	Each	Women's Health (PAPs / Biopsy / Swab Testing)
	Each	Prostate Histology / Urine Cytology
	Each	Podiatry

WOMEN'S HEALTH		
QTY.	UNIT (Qty.) <i>Check one</i>	DESCRIPTION
	<input type="checkbox"/> Tray (25): Vials <input type="checkbox"/> Brush & Spatula <input type="checkbox"/> Brush Only <input type="checkbox"/> Broom Collection	<input type="checkbox"/> ThinPrep PAP Supplies <input type="checkbox"/> SurePath PAP Supplies <i>Specify the quantity of vial trays and type/quality of collection device required.</i>
	BD Affirm Swab Kit (10)	Vaginosis Panel - Cand/Gard/Trict
	Box (25)	Conventional PAP Slide Kit

UROLOGY		
QTY.	UNIT (Qty.)	DESCRIPTION
	14-Vial Kit (1)	Prostate Biopsy Kit
	Each	90 ml Sterile Container

ADDITIONAL REQUESTS

FAX this completed form to (408) 395-0471 or send it via **Courier** to APMG.
Call (800) 848-2764, ext. 2715 if you have questions about your order.