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SUPPLIES REQUEST FORM

PLEASE ALLOW UP TO 7 DAYS FOR THE SUPPLIES TO BE DELIVERED

SUPPLIES REQUEST FORM

Date: _____

Client Name: _____

TUBES

- ▶ SST (Marble top tubes)
- ▶ Red (Plain Red tubes)
- ▶ Lavender (EDTA)
- ▶ Light Blue (Sodium Citrate)
- ▶ Grey (Potassium Oxalate)
- ▶ Green (Sodium Heparin)
- ▶ Royal Blue (Trace Element K2 EDTA)
- ▶ Transfer Tubes
- ▶ Urine Culture and Sensitivity

MISCELLANEOUS

- ▶Gloves S M L
- ▶Gauze 2x2
- ▶Gauze 4x4
- ▶Alcohol swab
- ▶Bandaid
- ▶Needle Holder
- ▶Tourniquet
- ▶Sharp Containers
- ▶24H Urine Containers
- ▶Sterile Urine Containers
- ▶O & P Containers
- ▶Specimen Bags

NEEDLES

- ▶21x1" (Box of 100)
- ▶22x1" (Box of 100)
- ▶22x1 1/2" (Box of 100)
- ▶22x1 1/4" (Box of 100)

BUTTERFLY NEEDLES

- ▶21G 3/4" (Box of 50)
- ▶23G 3/4" (Box of 50)
- ▶25G 3/4" (Box of 50)

COVID-19

- ▶VTM / UTM-RT Medium
- ▶NP Swab
- ▶Sputum Container
- ▶
- ▶
- ▶

OTHER

- ▶Lab Request Form
- ▶Allergy Lab Request Forms