

Sacramento County Public Health Laboratory

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Sacramento, CA 95820

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REQUISITION FOR LABORATORY SUPPLIES -PLEASE PRINT-

Clinic _____

Telephone _____

Date _____

Requestor _____

REQUESTOR: PLEASE KEEP A COPY

COLLECTION KITS

Qty	Unit	Description
	Ea	Aptima Male/Female Swab (CT/GC)
	Ea	Aptima Urine Collection (CT/GC)
	Ea	Charcoal Swab (Amies)
	Ea	Darkfield (Syphilis FADF)
	Ea	Enteric (Salmonella/Shigella/ E.coli 0157:H7/ Campylobacter)
	Ea	Fungus Kit
	Ea	Parasite (O & P)
	Ea	Quantiferon Collection Kit
	Ea	Strep A Screen (Glass Beads in tube)
	Ea	Urine Preservative Containers (UPP)
	Ea	Viral Transport Media

OTHER

Qty	Unit	Description

MEDIA

Qty	Unit	Description
	Kits	Bordetella pertussis
	Plates	GC Pill Plate

LABORATORY FORMS

Qty	Unit	Description
	Ea	HIV Consent Form
	Ea	Requisition for Lab Supplies
	Ea	Universal Requisition Form

SUPPLIES

Qty	Unit	Description
	Ea	Sm. Zip Lock Biohazard Bags 6x9
	Ea	Lg. Zip Lock Bags 13x9

REAGENTS

Qty	Unit	Description
	Btl	10% KOH
	Btl	0.85% Saline (non-sterile)

Please return empty bottles for refill.

For Lab Use Only
Received By/ Date: _____
Order Filled By/ Date: _____

Notes: _____