**St. Joseph Hospital Clinical Laboratory**

**Phone: 907-1659**

**Fax: 907-1909**

**CLIENT SUPPLY REQUISITION**

Client:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Location/Building:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Ordered by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Quantity** | **Unit** | **Description** |
|  | Each | Herpes/Varicella Swabs (white) |
|  | Each | Wound Swabs (blue double swab) |
|  | Each | STD Swabs, female (Gene Xpert/pink swabs) |
|  | Each | Influenza/RSV/Covid Swabs (VTM) |
|  | Each | Strep eSwab Transport Swabs (purple) |
|  | Each | Bordetella Swabs (green) |
|  | Each | Ova & Parasites (no travel history), C Diff, Stool Culture, H Pylori (orange cap vial) |
|  | Each | Ova & Parasites with Travel History (green cap vial) |
|  | Each | WBC Stool Kits (blue cap vial) |
|  | Each | Fit Cards |