

Cytology Specimen Collection Manual

Sharp Coronado Hospital Sharp Chula Vista Medical Center Sharp Memorial Hospital Sharp Grossmont Hospital Sharp Copley Laboratory

March 2022

PREFACE

The purpose of this manual is to provide general instructions for cytology specimen collection and handling where specimen quality may affect the cytologic diagnosis. It is not intended to encompass the whole process of specimen collection such as special techniques, patient preparation, or contraindications. Universal precautions should always be followed for any patient or specimen contact. For further assistance with individual cases or general questions, please contact the Cytology Department at 858-262-6973 or Dr. Wayne Muller at 858-939-3660.

Sharp Metropolitan Medical Campus 7901 Frost Street

San Diego, CA 92123 858-939-3660

858-939-8124

Sharp Grossmont Hospital 5555 Grossmont Center Dr. La Mesa, CA 91942 619-740-4492

Sharp Chula Vista Medical Center 751 Medical Center Ct. Chula Vista, CA 91911 619-502-3622

Sharp Coronado Hospital 250 Prospect Place Coronado, CA 92118 619-522-3627

Sharp Copley Laboratory 5651 Copley Dr. San Diego, CA 92111 858-262-6810

Pacific Rim Pathology Medical Group 9295 Farnham Street, Ste 100 San Diego, CA 92123 858-262-7284

I. GENERAL INFORMATION

A. LAB HOURS

Routine Cytology Questions:

Monday thru Saturday: 9:00 am – 5:00 pm Sunday: CLOSED After Hours/Emergencies: Call the appropriate hospital (see phone numbers on front

page) and request the pathologist On-Call 24 hours per day, 7 days per week

B. <u>TELEPHONE NUMBERS</u>

GYN Cytology results: Pacific Rim Pathology:858-261-7284NON-GYN Cytology results (and Biopsy results):858-261-7284Pathologist ON-CALL:858-261-7284 (ask for pathologist on-call)Supplies and Requisitions:858-261-7284

C. SPECIMEN SUBMISSION TO LABORATORY

- 1. Specimens may be submitted to the lab at any time, but generally will not be processed until the following morning.
- 2. Send specimens by appropriate courier to Specimen Log-In Department in Main Laboratory at Sharp Memorial Hospital, Sharp Chula Vista Medical Center, Sharp Grossmont Hospital, Sharp Coronado Hospital or directly to Pacific Rim Pathology (SRS).
- 3. Ideally, if a specimen is to be used for any lab test other than Cytology, the specimen should be split and sent separately with separate requisition forms. Cytology fixatives and refrigeration may render the specimen inadequate for other tests.
- 4. If the specimen cannot be split at the point of origin, send the specimen directly to the lab and clearly indicate on the requisition form which multiple tests are required. Do NOT refrigerate or fix any Cytology specimen that must be shared with Microbiology or any other department.

D. <u>REPORTING TIME AND STAT SPECIMENS</u>

- 1. Non-Gyn specimens will generally be reported within 48 to 72 hours.
- 2. GYN specimens will be sent to Pacific Rim Pathology and will generally be reported within 5 business days.
- 3. For any STAT requests, please call the appropriate hospital and ask for the On-Call Pathologist.

E. <u>SUPPLIES</u>

Please see the Supply Request Forms (Addenda A & B).

I. GENERAL SPECIMEN REQUIREMENTS

A. <u>GENERAL CRITERIA REQUIRED FOR EVALUATION OF SPECIMENS:</u>

- 1. All slides and containers require two patient identifiers.
- 2. Properly completed and matching requisition form including patient name, DOB, history, ICD codes, and specimen source. (See next page for additional information.)
- 3. Specimen intact (*i.e.*, slides not broken, container not leaking).
- 4. ***Please remove needles from all syringes before sending to the lab.

NOTE: If the above conditions are not met, the specimen may either be rejected without being processed, or an "Unsatisfactory" report may be issued.

B. <u>REQUISITION FORMS:</u>

1. Use a separate (Cytology) requisition for each patient (but multiple specimens on one patient may be placed on the same form).

2. The form must contain the following information or the specimen may be delayed, rejected, or reported as "Unsatisfactory".

Patient Information:

- Patient's full name
- Date of birth
- Sex
- SSN (optional, but strongly requested)
- Patient's address and phone number
- MRN (SRS patients)

Insurance Information:

• Complete insurance information or copy of insurance card attached (both sides)

Patient History:

- Pertinent patient history and treatment
- Pathologic conditions
- Instrumentation or therapy
- ICD codes

Specimen:

- Exact type or source of each specimen
- Method of collection
- Date and time of collection
- Name of submitting doctor with address and phone number
- 3. ADDITIONAL information required for GYN (pap smear) specimens:

Essential information:

- Exact source (i.e., Cervical and/or vaginal)
- First day of last menstrual period (LMP)
- Previous pap smear date and diagnosis
- ICD Code(s)

Pertinent history includes:

- Hysterectomy (Total or Cervix remaining)
- Pregnant or Post-partum
- Post-menopausal
- Hormones or BCPs
- Recent biopsy and diagnosis
- Radiation or other treatments
- Abnormal bleeding or other symptoms
- IUD
- Other neoplasms

II. SPECIMEN COLLECTION PROCEDURES

- A. <u>GENERAL DIRECTIONS FOR ALL DIRECT SMEAR SPECIMENS—GYN (Pap Smears) and</u> <u>NON-GYN (including skin and oral lesions, buccal smears, and nipple secretions)</u>
 - 1. Identify all direct smear specimens with patient's last name, first initial and a second identifier written in pencil on the frosted end of each glass slide **before the smear is taken**.

- 2. Using spatula or brush, gently and smoothly spread the sample over the surface of the slide creating a uniform layer (labeled side up!) For nipple secretions, touch glass slide to drop of secretion and gently slide across areolar area.
- 3. Complete the smearing procedure within **2** seconds in order to avoid cellular degeneration. If multiple slides are prepared, fix (step #4) each slide separately, as it is prepared.
- 4. *Immediately* spray smears thoroughly with cytology spray fixative at a distance of approximately 10 to 12 inches from the smear **OR** immediately drop slides into a Coplin jar containing 95% alcohol. Leave slides in alcohol for a minimum of 20 minutes.
- 5. Air dried smears (slides) can also be submitted. Prepare the slides as in #3 above, but let the smears air dry. Write "air dried" on the slides for proper processing. Allow slides to dry and send to lab in folder or container.

6. Send a completed requisition form and insurance information with all specimens. *****NOTE:** Do NOT place smears in same bag as biopsies as formalin vapors will adversely affect smear quality.

B. <u>SKIN LESION SMEARS</u>

- 1. Open vesicle or blister with sterile scalpel.
- 2. Scrape base and sides of vesicle with a sterile metal spatula or scalpel. Use direct smear technique described above (A.3 and A.4).

C. <u>GYN SPECIMENS (Pap Smears)</u>

- 1. The smear should not be taken during menstruation. Douching prior to the exam and lubricants should be avoided.
- 2. The cervical transformation zone should be thoroughly sampled in a patient with a cervix. Three suggested techniques:
 - Ectocervical followed by endocervical smear.
 - Smear slide with both sampling devices at once.
 - A single pass with one device sampling the entire t-zone.
- 3. If a hormonal evaluation is needed, a separate vaginal wall sampling is required.
- 4. Use direct smear technique described on previous page (III.A.)
- D. <u>GYN SPECIMENS (Pap Smears)—ThinPrep Method</u>

(from "ThinPrep Pap Test Quick Reference Guide", 1997, Cytyc Corporation)

Broom-like Device Protocol

- 1. Insert the central bristles of the broom into the endocervical canal deep enough to allow the shorter bristles to fully contact the ectocervix. Push gently, and rotate the broom in a clockwise direction five times.
- 2. Rinse the broom in the PreservCyt Solution vial by pushing the broom into the bottom 10 times, forcing the bristles apart. As a final step, swirl the broom vigorously to further release material. Discard the collection device.
- 3. Tighten the cap so that the torque line on the cap passes the torque line on the vial, label, and send in a plastic bag with completed requisition.

Endocervical Brush/Spatula Protocol

- 1. Obtain an adequate sampling from the ectocervix using a plastic spatula.
- 2. Rinse the spatula in the PreservCyt Solution vial by swirling the spatula vigorously 10 times. Discard the spatula.
- 3. Obtain an adequate sampling from the endocervix using an endocervical brush device. Insert the brush into the cervix until only the bottommost fibers are exposed. Slowly rotate $\frac{1}{4}$ or $\frac{1}{2}$ turn in on direction. DO NOT OVER-ROTATE.
- 4. Rinse the brush in the PreservCyt Solution by rotating the device 10 times while pushing against the PreservCyt vial wall. Swirl vigorously. Discard brush.
- 5. Tighten cap so that the torque line on the cap passes the torque line on the vial.

6. Label and send in a plastic bag with completed requisition.

E. <u>SPUTUMS</u>

- 1. Instruct patient to expectorate a deep cough specimen directly into container— saliva is NOT adequate for diagnostic purposes. The specimen must include material coughed up from the lungs. An induced specimen is preferred.
- 2. Send specimen directly to lab without fixative. Refrigerate if delayed.
- 3. Write any special instructions on the label and/or requisition.

F. WASHINGS AND LAVAGES—Bronchial or Alimentary Tract Specimens

- 1. Send specimen directly to lab without fixative. Refrigerate if delayed.
- 2. Write any special instructions on the label and/or requisition.

G. <u>BRUSHINGS</u>—Bronchial or Alimentary Tract Specimens

- 1. Insert brush into Cytolyt or Saccomanno brush container and agitate.
- 2. Cut wire and send container to lab with brush enclosed.
- 3. Write any special instructions on the label and/or requisition.

H. BODY CAVITY FLUIDS

- 1. Please be sure to specify the exact specimen type (i.e., Paracentesis vs. abdominal washing).
- 2. Use appropriate size container for specimen volume. Small volume specimens (fluid less than 12 cc) should be sent in a small centrifugation tube.
- 3. Send specimen directly to lab without fixative. Refrigerate specimens **that are only for Cytology** if there is a significant delay.

I. URINARY TRACT SPECIMENS

- 1. *****Please specify specimen collection method** (*i.e.*, voided urine, catheterized urine, urinary bladder washing, etc.).
- 2. Attempt to collect the second urinary specimen in the morning.
- 3. Send specimen directly to lab without fixative. Refrigerate if delayed.

J. <u>CEREBROSPINAL FLUID</u>

- 1. The cells in CSF are very delicate and the specimen must be delivered ASAP. Fill out a CSF order form per Doctor's orders, keeping the top copy for the patient's chart.
- 2. Send specimen directly to lab without fixative.

K. FINE NEEDLE ASPIRATION OF NON-PALPABLE LESIONS (by CT scan, etc.)

- 1. For rapid assessment of specimen adequacy, call the appropriate hospital laboratory for pathologist assistance.
- 2. Prepare slides / specimen as described in section III.L.

L. FINE NEEDLE ASPIRATION OF PALPABLE LESIONS

- 1. The syringe gun, syringe, and needle are assembled. All slides and specimen containers are labeled with patient name and a requisition form is completed.
- 2. The lesion is palpated and its distance from the skin estimated.
- 3. Skin surface is sterilized with alcohol or other iodine-like solution.
- 4. The target is fixed with one hand, usually between index finger and thumb.
- 5. The needle is placed into the mass. Usually a distinct change in consistency of tissue is felt when a subcutaneous lesion is entered.
- 6. The plunger on the syringe is withdrawn to create a vacuum. The needle tip is moved within the mass with short movements, withdrawing approximately 2 to 5 mm and reinserting with redirection of the needle tip. At least three needle passes should be performed within the target lesion.

- 7. Negative pressure within the syringe is released when aspiration is complete or when any hemorrhagic material or fluid is noted within the needle hub or syringe.
- 8. If a cystic lesion is aspirated, the cyst fluid should be placed directly into a separate vial of Cytolyt solution. It is recommended that the cyst wall of the lesion then be re-aspirated to insure that the cyst wall has been properly sampled.
- 9. Prepare slides / specimen as described below.

M. FINE NEEDLE ASPIRATION—Specimen / Slide Preparation

- 1. The Licensed Care Provider must label all slides and specimen containers with two patient identifiers. The slides also need to be identified as **air dried** or **fixed**, as appropriate, as the stain type is different.
- A small drop of the aspirated material is carefully expressed onto the glass slide (labeled side up!). Several slides are usually prepared at one time in this fashion.
 NOTE: If a drop cannot be expressed, the syringe needle may be detached and the plunger withdrawn to fill the syringe with a small amount of air and the needle reattached to the syringe (Careful! Use single hand technique only). The specimen should then be more easily expressed.
- 3. Smears are prepared by placing one glass slide perpendicular to the other, over the expressed material. The expressed material is GENTLY smeared over the original glass slide surface by sliding the second perpendicular slide over its surface. (No resistance should be felt. It is not necessary to cover the entire slide with material.)
- 4. Once the smear is achieved, the original glass slide should be <u>immediately</u> placed in the alcohol fixative (have Coplin jar containing 95% alcohol ready). The remaining slides are smeared one at a time and placed in the alcohol fixative.
- 5. If air-dried smears are desired, no fixative is required. Let these smears air dry and place in a slide folder/container for transport to the laboratory. (Note: These are sometimes helpful in lesions involving the thyroid gland, salivary gland, and lymph nodes). **The slides need to be labeled "air-dried"**.
- 6. The needle should then be rinsed with Cytolyt solution for Thin Prep or cell block preparations. This is done by drawing some fluid into the syringe and then expressing the entire contents into the ThinPrep vial.
- 7. All slides and specimen containers must be labeled with two patient identifiers and sent with a completed requisition form.

V. REFERENCES

- A. Koss, L., Diagnostic Cytology, 4th ed., 1992.
- B. Bibbo, M., Comprehensive Cytopathology, 1991.
- C. Keebler, C. M., Somrak, T. M., The Manual of Cytotechnology, 7th ed., 1993. D. Cytyc Corporation, "ThinPrep Pap Test Quick Reference Guide", 1997.
- D. Solomon, D., Nayar, R., eds., The Bethesda System for Reporting Cervical Cytology, 2nd ed., 2004.

V. ADDENDA

- A. Pacific Rim Pathology Supply Request Form
- B. Sharp Laboratory Services Supply Order Form

VI. APPROVALS

- A. Wayne Muller, M.D., Pathologist; Vanessa Fox, Anatomic Pathology Manager; March 2022
- B. Arturo Mendoza, M.D., SMMC Pathologist; Anand Kunda, M.D., SCOR Pathologist; Octavio Armas, M.D., SCV Pathologist; James Carry, M.D., SGH Pathologist; Christopher Wixom, M.D., SCL Pathologist: March 2022

SHARP.

Surgical Pathology Specimen Collection Manual

Sharp Coronado Hospital Sharp Chula Vista Medical Center Sharp Memorial Hospital Sharp Grossmont Hospital Sharp Copley Laboratory

March 2022

PREFACE

The purpose of this manual is to provide general instructions for surgical pathology specimen collection and handling where specimen quality may affect the diagnosis. It is not intended to encompass the whole process of specimen collection such as special techniques, patient preparation, or contraindications. Universal precautions should always be followed for any patient or specimen contact

For further assistance with individual cases or general questions, please contact the Pathology Department at the appropriate location below.

Sharp Metropolitan Medical Campus 7901 Frost Street San Diego, CA 92123 858-939-3660 858-939-8124

Sharp Grossmont Hospital 5555 Grossmont Center Dr. La Mesa, CA 91942 619-740-4492

Sharp Chula Vista Medical Center 751 Medical Center Ct. Chula Vista, CA 91911 619-502-3622

Sharp Coronado Hospital 250 Prospect Place Coronado, CA 92118 619-522-3627

Sharp Copley Laboratory 5651 Copley Dr. San Diego, CA 92111 858-262-6810

I. GENERAL INFORMATION

A. LAB HOURS

Routine Questions:

Monday thru Saturday: 9:00 am – 5:00 pm Sunday: CLOSED

After Hours/Emergencies: Call the appropriate hospital (see phone numbers on front page and below) and request the pathologist On-Call 24 hours per day, 7 days per week

B. <u>TELEPHONE NUMBERS</u>

Sharp Copley Laboratory/Report Results: Sharp Memorial Hospital – 858-939-3660 / 858-939-3663 / 858-939-8124 Sharp Grossmont Hospital – 619-740-4492 Sharp Chula Vista Medical Center – 619-502-3622 Sharp Coronado Hospital – 619-522-3627 Supplies and Requisitions: 858-261-7284

C. SPECIMEN SUBMISSION TO LABORATORY

- 1. Specimens may be submitted to the lab at any time, but generally will be processed within the schedule indicated above.
- 2. Send specimens by appropriate courier to Specimen Log-In Department in Main Laboratory at Sharp Memorial Hospital, Sharp Grossmont Hospital, Sharp Chula Vista Medical Center, Sharp Coronado Hospital or the Sharp Copley Laboratory.
- 3. Ideally, if a specimen is to be used for any lab test other than Surgical Pathology/Histology, the specimen should be split and sent separately with separate requisition forms. Histology fixatives and refrigeration may render the specimen inadequate for other tests.
- 4. If the specimen cannot be split at the point of origin, send the specimen directly to the lab and clearly indicate on the requisition form which multiple tests are required. Do NOT refrigerate or fix any specimen that must be shared with Microbiology or any other department.

D. <u>REPORTING TIME AND STAT SPECIMENS</u>

- 1. Routine surgical specimens will generally be reported within 2 to 3 working days.
- 2. For any STAT requests, please call the appropriate hospital and ask for the On-Call Pathologist.

E. <u>SUPPLIES</u> Please see the Supply Request Forms (Addenda A & I

Please see the Supply Request Forms (Addenda A & B).

II. GENERAL SPECIMEN REQUIREMENTS

A. <u>GENERAL CRITERIA REQUIRED FOR EVALUATION OF SPECIMENS</u>

- 1. All slides and specimen containers must have two patient identifiers.
- 2. Properly completed and matching requisition form including patient name, DOB, history, ICD codes, and specimen source.
- 3. Specimen intact (*i.e.*, container not leaking).

Please remove needles from syringes before sending to lab.

NOTE: If the above conditions are not met, the specimen may either be rejected without being processed or processing delayed until the issue is resolved.

B. <u>REQUISITION FORMS</u>

1. Use a separate Pathology requisition for each patient (but multiple specimens on one patient may be placed on the same form).

2. The form must contain the following information or the specimen may be delayed or rejected.

Patient information:

- Patient's full name
- Date of birth
- Sex
- SSN (strongly suggested)
- Patient's address and phone number
- MRN (SRS patients)

Insurance information:

• Complete insurance information or copy of insurance card attached (both sides)

Patient history:

- Pertinent patient history and treatment
- Pathologic conditions
- Instrumentation or therapy
- ICD codes

Specimen:

- Exact type or source of each specimen
- Method of collection
- Date and time of collection
- Name of submitting doctor with address and phone number

III. SPECIMEN COLLECTION PROCEDURES

A. <u>COMMONLY USED TERMS</u>

- 1. *Specimen*: any product of a medical procedure. These can be soft tissues, bone tissue, fluids, foreign bodies, surgical appliances/hardware. The terms "sample", "specimen", and "tissue" are often used interchangeably.
- 2. *Fixative*: a solution used to stabilize cellular components in preparation for Histological examination. Proper fixation is essential for Histology, but it kills cells and acts in other ways that limits many research applications. 10% neutral or Zinc buffered formalin is the most common routine fixative.
- 3. *Fresh*: no fixative has been used. Fresh tissue samples must be frozen, placed in a transport media to keep the cells alive, or stabilized in some other way as soon as possible to prevent autolysis.
- 4. *Frozens Sections*: specimens that are or have been frozen for rapid microscopic exam during an intraoperative consultation. Frozen section slides are cut on a cryostat for rapid microscopic analysis. The remaining tissue is placed in fixative to be made into permanent sections.
- 5. *Permanent Sections*: a specimen that is treated with fixative and processed to a paraffin matrix that permanently preserves them at ambient temperature. "Paraffin block" is an equivalent term. "Permanents", or paraffin blocks, are specimens for which a microscopic histological exam can be performed. The histology of permanents is superior to that of frozens.

B. <u>GENERAL HANDLING AND PRESERVATION OF TISSUE SPECIMENS</u>

- 1. Fresh Tissues submitted with **no fixative**:
 - a. Specimens for Frozen Sections or gross exam must be received fresh
 - b. Lymphocyte markers to rule out lymphoma. Send fresh to Surgical Pathology or place in RPMI transport media and send to Surgical Pathology.

- c. Uric Acid crystals note on requisition to rule out gout (see special requirements below).
- d. Microbiologic culture specify cultures desired fresh specimen required.
- e. Muscle biopsies contact the appropriate Hospital Surgical Pathology Department (see contact information above) for instructions before procedure.
- f. Renal biopsies contact the appropriate Hospital Surgical Pathology Department (see contact information above) for instructions before procedure.
- 2. Cytogenetic studies: Tissues for Cytogenetic analysis should be immediately placed in RPMI media to preserve viability and sent to the laboratory as soon as possible.
- 3. Routine specimens submitted in 10% Zinc Formalin:
 - a. Surgical Pathology specimens should be placed in at least 10 times their volume of formalin immediately upon procurement for adequate fixation.
 - b. The laboratory provides prefilled formalin containers. If the specimen is a large specimen the formalin can be added by Histology staff to the specimen container during regular Histology hours (see hours above). At other times the OR is provided with formalin which can be added by OR staff.
- 4. Any questions regarding handling of tissues should be directed to the Pathologist in charge. There is a Pathologist on duty or on-call at all times.

C. <u>SPECIAL HANDLING</u>

All specimens submitted to Surgical Pathology for examination will be submitted in 10% Zinc Formalin with a sufficient amount of fluid to achieve a 10:1 ratio of formalin to specimen. Specimens without sufficient formalin may require extra time of fixation, causing a delay in processing.

Exceptions to the 10% Zinc formalin are listed below.

- 1. **Amputated limbs:** Amputated limbs and Pathology requisition are delivered to Surgical Pathology by the OR personnel.
- 2. **Renal biopsies:** Renal biopsy specimens are immediately delivered <u>Fresh</u> to Surgical Pathology. Special handling is required. For detailed information contact Surgical Pathology.
- 3. **Muscle biopsies:** Muscle biopsy specimens are immediately delivered <u>Fresh</u> to Surgical Pathology. Special handling is required. For detailed information contact Surgical Pathology.
- 4. **Nerve biopsies:** Nerve biopsy specimens are immediately delivered <u>Fresh</u> to Surgical Pathology. Special handling is required. For detailed information contact surgical pathology.
- 5. **Breast needle localization specimens:** These specimens are sent from the OR or Radiology to Surgical Pathology <u>immediately after removal from the patient</u>. A frozen section may be requested.
- 6. **Stones for analysis:** Renal calculi are collected and sent to Surgical Pathology fresh, without fixative. The specimen(s) should be placed in a collection vial dry and transported to Surgical Pathology. The specimen container must not contain any fixative, saline or urine.
- 7. **Uric acid analysis (Gout):** Specimens to be tested for gout are immediately delivered <u>Fresh</u> to Surgical Pathology. Special handling is required. For detailed information contact Surgical Pathology.
- 8. **Placenta/POC for chromosome analysis:** These specimens are collected and sent <u>fresh</u> immediately to Surgical Pathology. A tissue requisition along with a Cytogenetics request (specifying chromosome testing) must accompany the specimen.

IV. **REFERENCES** – N/A

V. ADDENDA

- A. Pacific Rim Pathology Supply Request Form
- B. Sharp Laboratory Services Supply Order Form

VI. APPROVALS

- A. Arturo Mendoza, M.D., SMMC Pathologist; Vanessa Fox, Anatomic Pathology Manager: March 2022
- B. Arturo Mendoza, M.D., SMMC Pathologist; Anand Kunda, M.D., SCOR Pathologist; Octavio Armas, M.D., SCV Pathologist; James Carry, M.D., SGH Pathologist, Christopher Wixom, M.D., SCL Pathologist: March 2022

ADDENDUM A



Pacific Rim Pathology Medical Corporation

Supply Request Form

Name of Office / Physician:				
Send Attention to:	Phone: () -			
Office Address:				
If SRS, please indicate entity:				
Cytology	UNIT	QTY		
Small Specimen Bags "6x9"	Package (100/pkg)			
Slides	Box (75 slides/box)			
Spray Fixative	Bottle			
Cardboard Slide Mailers	Box (24 holders/box)			
ThinPrep CytoLyt for FNAs (NGYN, pink tube)	Tray (20 vials/tray)			
ThinPrep PAP Specimen Vials (GYN)	Tray (25 vials /tray)			
ThinPrep Collection Kit (Brush and Spatula)	Bag (25 each/bag)			
ThinPrep Wallach Papette Brooms	Bag (25 brooms/bag)			
Surgical/GYN Requisition Forms	Form			
Check box if address is pre-	printed on requisitions. Please note: Orders	s may take up to 5 business day		
Histology				
Renal Kits	Kit			
Bone Marrow Kits	Kit			
Michel's Solution	Vial			
Glutaraldehyde Vials	Vial			
Formalin 20 ml	Vial			
Formalin 40 ml	Vial			
Formalin 60 ml	Vial			
Formalin, specify volume:mL	Vial			
Molecular				
Non Invasive Prenatal Testing (NIPT) Tubes	Tube			
Hank's Solution (for POC, products of conceptions, testing)	Vial			
Gen-Probe Aptima Tubes (Ancillary testing)	Tube			
Verifi Prenatal Testing – Requisition Forms	Form			
Please indicate if other:				
Special Instructions:				
Fax completed form to (858) 939-1447. Or send by en For questions, please of	mail to: supplyorders@pacificrimpatho all (858)261-7284.	ology.com		
Allow 2 business days for delivery of supplies. Illegible	requests or requests with an inaccurat	te address will be delayed.		

ADDENDUM B

CL	EAR FORM	4		SH	ARP	Ĺ	abora	tory	
						C i	ervice	S	
Practice Name:				Address:					
Client ID: Ordered By:									
Phone: Fax:							Order Date:		
S	ubmit you SUBMIT	Ir com FORM	pleted buttor	supply order OR attach f Orders wi	form ONCE A orm to email a ill be delivered	MON nd se I withi	ITH on Mo nd to labo n 3 busine	nday o utreac ess day	or Tuesday by clicking the red hsupply@sharp.com. ys.
Qty	Order Unit	Manf#	NEEDL	ES/VENIPUNCT	TURE SUPPLIES	Gty	Order Unit	Mants	MICROBIOLOGY - SWABS
	Each Bex of 100	450072	NEEDLE	ES VACUTAINER	21g		Bex of 50	220245	WHITE E SWAB (Anaerobic / Aerobic Cultures: lesions, throat, vaginal, Rapid Strep)
	Each Box of 100	450071	NEEDLES VACUTAINER 22g				Box of 50	200532	BLUE E SWAB (Mini-tip swab for ear, eye, genital, pediatric)
	Each Box of 500	364815	Orange Safety NEEDLE HOLDER: Single use				Bex of 50	4040	LIGHT BLUE M SWAB (MRSA / Staph aureus molecular)
Gty	Order Unit	Mant#	BLOOD	COLLECTION	TUBES		Box of 50	4320531	UNIVERSAL VIRAL TRANSPORT / UVT (Influenza, Pertussis Swab, SARS-CoV-2)
	Each Box of 50	454420	LAVENDER Top-White Ring K2EDTA 2.0mL		ng K2EDTA 2.0mL		Box of 10	440255	AFFIRM (Trich, Gardnerella, Candida)
	Box of 50	(CACHOP	GOLD Top-Gold Ring SST 5.0mL				Box of 100	0517051 0190	COBAS PCR CT/NG FEMALE KIT (Swab)
	Box of 50	64297	GRAY Top-Black Ring Glucose 4.0mL			Box of 100	0517048 8190	COBAS PCR CT/NG URINE	
	Each Box of 50	454302	LIGHT E	LIGHT BLUE Top-Black Ring OWC Coag Sod Cit 3.2% 3.5mL RED Top-Black Ring 4.0mL			Each	NA	SARS-CoV-2 SALINE TUBE KIT
	Box of 50	454204	RED TO			Gty	Order Unit	Mant#	MICROBIOLOGY - STOOL
City	Order Unit	Mant#	URINE	COLLECTION			Each Box of 20	220004	OVA & PARASITE VIAL (Black Top)
sicus	Each Box of 50	CSHOC		CULTURE TUBES	1		Box of 20	900012	STOOL CULTURE VIAL (Orange)
	Each Box of 50	CHENCE	URINALYSIS TUBES			Box of 25	20204	FIT (INSURE) TEST KIT	
	Box of 100	021038		CUPS (Sterlie)	a:	Gty	Order Unit	Mant#	GENERAL
	Each	02090	URINE 2	24-HR CONTAINER	R		Each MIN 50 MAX 500	NA	LABORATORY REQUISITIONS **
	Each	02071		COLLECTION HAT	s		Beg of 100	207712	6 X 9 SPECIMEN BAGS
	Bat	825(100	CLEAN	CATCH TOWELET	пе	aty	Order Unit	Mant#	PSC PADS / PATIENT HANDOUT
City	Order Unit	Mant#	GLUCO	DSE DOSES			Each	NA	PSC PADS (English/Spanish)
0.0000	6 Pk	NO CO OBE	50 G OF	RANGE / LIME	6		Each	NA	LAB PATIENT HANDOUT (BI-Fold)
**Important Note: Laboratory requisitions are ordered through an outside supplier and shipped directly to you, therefore, it may take up to two weeks for delivery.					e ordered stly to you, leilvery.	aty	Order Unit	Mants	SPECIAL REQUESTS (ADD BELOW)
NOTE lab Call 8	It is the poli specimens 58-262-6854	cy of Sha referred with any	to our supply rel	tory Services to p lab and is ated questions or	rovide lab supplies s not an inducem email us at <i>laboutre</i>	olely fo ent to achsupp	r the purpose of order test oly@sharp.com	of orderi s from).	ng, collecting, processing and transporting or refer patients to Sharp Lab.