

Pacific Rim Pathology Medical Corporation Supply Request Form

Date:		
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 pro	e-printed on requisitions. Please note: Orde	rs may take up to 5 business days.
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		ology.com
For questions, please call (858)261-7284. Allow 2 business days for delivery of supplies. Illegible requests or requests with an inaccurate address will be delayed.		

Revised August 2021