



(Required) Location Name	_____
(Required) Site Code	_____
(Required) Date Submitted	_____
(Required) Submitter Phone	_____
(Required) Submitter Name	_____

QTY	UOM	DESCRIPTION	Item#	QTY	UOM	DESCRIPTION	Item #	QTY	UOM	DESCRIPTION	Item #	
SPECIMEN TRANSPORT SUPPLIES				TEST KITS				SURGICAL PATH SUPPLIES				
each		Specimen Transport Biohazard Bag	801003	each		Quantiferon TB	801661			Tissue Bags, Whirl Pak:		
each		Cardboard Mailing Box	800991	each		ARUP ONLY NIPT Aneuploidy	801674	each		Small		
each		Styrofoam Mailer	801004	each		ARUP ONLY BreathTek H. Pylori Kit	801551	each		Medium		
each		Serum Transport Tube (must also order caps below)	801594	each		CLO test	800488			Prefilled Formalin Vials:		
each		Serum Transport Cap	801595					each		20ml		
each		Urine Transport Tube with cap	800484					each		90ml		
each		ARUP ONLY Transport Tube/cap	800052					each		Placenta Jar		
each		ARUP ONLY Amber Transport Tube/cap	801010	COLLECTION TUBES				Item #	each		Large Zip Formalin bag with biohazard bag (tissue transport)	
each		MEDTOX ONLY Drug Test Transport Container	800500	each		5ml SST Yellow	800008					
each		Postage Paid Labels	800936	each		4ml NA Heparin, Dark Green	800033					
each		Blue Ice Packs (XC-12R) - Frozen	800986	each		2.7ml NACitrate, Light Blue	800881					
each		White Ice Packs - Refrigerated	801084	each		4ml EDTA, Purple	801054					
each		Bubble Bag Specimen Transport	801642	each		6ml K2EDTA, Pink	800077	MISCELLANEOUS				
				each		6ml Plain Red SERUM	800086	each		24 hour Urine Container	800099	
				each		4.5ml PST gel/lithium hep, Light green	800007	each		ARUP ONLY Fecal Fat Jar	800222	
				each		ARUP ONLY 7ml Plain Royal Blue (trace mineral). Also order transport tube below	800031					
REQUEST FORMS				Item #	each	Trace Element Free Transport	800195	PRINTER TONER SUPPLIES				
each		Clinical Laboratory	800927	each		7ml EDTA Royal Blue (Lead testing)	801012	roll		HVR Labels	800955	
each		Sheet labels for Clinical Lab Request Forms	800117	each		MAYO ONLY ACD Solution B	800238	ream		Printer Paper	800952	
each		Non GYN		each		ARUP ONLY Pediatric Lead	800195	Indicate Your Printer Model # if a new toner cartridge is needed. Model # : ***ORDERING INSTRUCTIONS*** Please indicate quantity of items needed. Only order items used to send testing to NPL. Supplies for any testing performed internally must be provided by the client. Please allow 1-3 business days for delivery. Fax is the PREFERRED request method: 701-530-6659 Otherwise please call: 701-530-6690				
each		Surgical Pathology Tissue										
each		PAP Smear										
CULTURE SUPPLIES				Item #	CYTOLOGY SUPPLIES				Item #			
each		Amies Transport Media (pink top)	800953	box		Frosted End Slides						
each		C&S Liquid Cary Blair (stool culture, OVP, GICPP)	800510	bottle		Pap Smear Spray Fixative						
each		Eswab (anaerobic cultures)	800047	each		Slide Holders, single						
each		ARUP ONLY M-4 Transport Media	801008	each		Slide Holder, 5 slide						
each		Flocked swab & UTM (flu testing, HSVAM, RPPCR)	801130			Thin Prep Collection Devices:						
each		BD Affirm VPIII Swab (VAGP)	801156	each		Thin Prep Pap Vials						
each		MRSA PCR Copan Swab (MRSAP, SSTIP)	801184	each		Brushes and Spatulas						
each		Urine Culture Kit	800063	each		Brooms						
		Blood Culture Bottles:										
each		Aerobic	800001									
each		Anaerobic	800003									
each		Pediatric	800014									
each		Aptima Hologic unisex swab (Chlamydia/GC)	800244	NON GYN SUPPLIES				Item #				
each		Aptima Hologic urine collection (Chlamydia/GC)	800089	bottle		CytoLyt 32 oz Bottle						
each		ARUP ONLY O&P Travel Kit (test code OPFA)	800027	each		CytoLyt Pre-filled Specimen Cup						
				each		CytoLyt Specimen Cup, empty						
each		BISMARCK CLIENTS ONLY Strep A Rayon Swab	800271									

Other: _____