



**PENINSULA PATHOLOGY  
ASSOCIATES**

Service • Technology • Experience

**CLIENT REQUEST FOR ANATOMICAL PATHOLOGY SUPPLIES**

To Become a NEW CLIENT, Call CHRISTINE STARCHER at 757-846-1712

(Existing Clients w/SUPPLY ORDER or Supply Questions, Please Call the MAIN LAB at 757-594-2001)

or FAX Completed SUPPLY ORDER Form to 757-594-3237

CYTOLOGY SERVICES: Phone (757) 594-2884

Physician Office: \_\_\_\_\_

Address/Phone: \_\_\_\_\_

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

**FORMS**

**QTY**

**QTY**

- |   |       |  |       |
|---|-------|--|-------|
| <input type="checkbox"/> Pathology Requisition Forms (100/pack) | _____ | <input type="checkbox"/> Cytology Requisition Forms (100/pack) | _____ |
| <input type="checkbox"/> Specimen Log Book (ea)                 | _____ | <input type="checkbox"/> Manifest Sheets (ea)                  | _____ |

**CYTOLOGY SUPPLIES**

**PATHOLOGY SUPPLIES**

- |  |       |  |       |
|--|-------|--|-------|
| <input type="checkbox"/> Thin Prep Vials (25/tray)           | _____ | <input type="checkbox"/> 10ml Formalin (100/box) | _____ |
| <input type="checkbox"/> Cyto Brushes (100/box)              | _____ | <input type="checkbox"/> 60ml Formalin (50/box)  | _____ |
| <input type="checkbox"/> Cyto Brooms (100/box)               | _____ | <input type="checkbox"/> 240ml Formalin (50/box) | _____ |
| <input type="checkbox"/> Cyto Plastic Spatulas (100/pack)    | _____ | <input type="checkbox"/> Slide Mailers (ea)      | _____ |
| <input type="checkbox"/> Cyto Spray Fixative (ea)            | _____ | <input type="checkbox"/> Lg Transport Bags (ea)  | _____ |
| <input type="checkbox"/> Pap Paks (50/box)                   | _____ |  |       |
| <input type="checkbox"/> Barrett's Esophagus FISH Panel Kits | _____ |  |       |

**MISCELLANEOUS**

- |  |       |   |       |
|--|-------|---|-------|
| <input type="checkbox"/> Biohazard Bags (100/pack) | _____ | <input type="checkbox"/> Tissue Buckets (172 ozs) | _____ |
|--|-------|---|-------|

*Note: Supplies are provided only for specimens sent to Peninsula Pathology Associates*

Order filled by: \_\_\_\_\_ Date: \_\_\_\_\_

**Peninsula Pathology Associates**

Riverside Regional Medical Center, 500 J. Clyde Morris Blvd., Newport News, VA 23601, (757) 594-2160

[www.ppapathology.com](http://www.ppapathology.com)