



**Knoxville Regional Laboratory
Tennessee Department of Health
Division of Laboratory Services
Laboratory Supplies Requisition**

Requesting Facility Ship to Address (Print or Type)

Facility Name:

Address:

City:

State:

Zip Code:

Contact Person:

Phone: ()

E-mail Address:

Fax Number: ()

Supplies Requested	UOM	QTY	Supplies Requested	UOM	QTY
Gen-Probe Unisex Kit	50/Bx		Vacutainer tubes (6 ml draw)	100/Pk	
Gen-Probe Urine Kit	50/Bx		Serum Separator Tubes (SST)	100/Pk	
Gen-Probe Multi-test Kit	50/Bx		Small biohazard bags 6X9 w/absorbent squares	100/Pk	
Foodborne Outbreak Stool Collection Kit	Ea		Color biohazard bags 6X9 w/absorbent squares	100/Pk	
Parasites (O&P) Specimen Kit	Ea		Large biohazard bags 12X15	50/Pk	
TB Specimen Kit Ea	Ea		Courier Labels – NASHVILLE (RED)	50/Pk	
Viral Transport Media (1.5ml/tube)	Ea		Courier Labels – KNOXVILLE (GREEN)	50/Pk	
Gonorrhea Culture Media (In-Tray)	Ea		Other (Please Specify)	Ea	
Newborn Screening Request Form (PH-1582)	100/Pk				

Ordering Reminders

- Order only what you will use in one month
- Submit order one week in advance of need
- Please be mindful to check expiration dates
- Replacement media is available for expired media in complete kits
- Questions, please call (865) 549-5201

Ways to Order

1. FAX: (865) 594-5199
2. Mail: Knoxville Regional Laboratory
Tennessee Department of Health
Division of Laboratory Services
2101 Medical Center Way
Knoxville, Tennessee 37920

For Laboratory Use Only

RECEIVED _____
Date

FILLED _____
Date

INITIALS _____
Date

SHIPPED _____
Date