

Supply Request Form

You can:

Fax (314) 645-1953

Email: avlstl@yahoo.com

Or give the form to your courier

Clinic: _____

Date: _____

Forms:

- Test Request Forms
- Heartworm/Fecal Forms
- Histology Forms

Miscellaneous:

- Biopsy Jars
- Culturettes (Micro)
- Culturettes (Regular)
- Slides Holders
- Fecal Centrifugation Tubes
- Bags

Specimen Tubes:

- Lavender Top
- White Top (no additives)
- Serum Separator
- Green Top Tubes (w/gel or w/out gel)
- Microtainer Heparin (w/gel or w/out gel)
- Microtainer Lavender Top
- Blue Top Tubes (citrated plasma)