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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **PATHOLOGY DEPARTMENT - ST HELIER HOSPITAL**  **REQUEST FOR MICROBIOLOGY SUPPLIES** | | | | | | | | |
| **Complete all sections and email request to** [est-tr.microbio@nhs.net](mailto:est-tr.microbio@nhs.net) | | | | | | | | |
| **Ward:** | Click or tap here to enter text. | | | **Extension:** | | Click or tap here to enter text. | | |
| **GP Surgery:** | Click or tap here to enter text. | | | **GP Code:** | | Click or tap here to enter text. | | |
| **GP Address:** | Click or tap here to enter text. | | | | | | | |
| **Contact Name:** | Click or tap here to enter text. | | | **Tel No:** | | Click or tap here to enter text. | | |
| **Date of Request:** | Click or tap here to enter text. | | | | | | | |
| **\*\*\*\*\* Please be aware of Product Expiry dates \*\*\*\*\***  **\*\*\*\*\* Stock Rotation is Essential \*\*\*\*\*** | | | | | | | | |
| **Type of Supply** | **Container Description** | **Unit of Issue** | **Tests** | | | | | **Required**  **Amount** |
| BD Vacutainer© Urine Collection Cup | N/A | 1 x 100 | All microbiology urines and biochemistry urines [with the exception of the tests on this list](https://www.swlpath.nhs.uk/wp-content/uploads/2023/08/Special-biochemistry-tests-that-require-a-20-mL-Universal-Urine-Container-August-2023.pdf). | | | | | Enter Amount |
| BD Vacutainer© urine Tubes for Microbiology | N/A | 1 x 100 | All microbiology urines | | | | | Enter Amount |
| BD Vacutainer© urine Tubes for Biochemistry |  | 1 x 100 | Biochemistry urines [with the exception of the tests on this list](https://www.swlpath.nhs.uk/wp-content/uploads/2023/08/Special-biochemistry-tests-that-require-a-20-mL-Universal-Urine-Container-August-2023.pdf). | | | | | Enter Amount |
| 30 mL Universals | White Top | 1x50 | Only for Immunology, dipstick, pregnancy urines and [chemistry urines on this list.](https://www.swlpath.nhs.uk/wp-content/uploads/2023/08/Special-biochemistry-tests-that-require-a-20-mL-Universal-Urine-Container-August-2023.pdf) | | | | | Enter Amount |
| Urine Cup | N/A | 1x50 | For urine collection | | | | | Enter Amount |
| "U" Bags | N/A | Each | Paediatric Urines | | | | | Enter Amount |
| Charcoal Swabs | Black Top | Each | General Bacteriology Use | | | | | Enter Amount |
| Dual Liquid Swab **MW167S** | White Top | Each | MRSA Screening, only use for Nose and Groin | | | | | Enter Amount |
| Single Liquid Swab **MW176S** | Purple Top | Each | MRSA Screening other sites, **do not use for Nose and Groin** | | | | | Enter Amount |
| Stool Containers | Blue Top | 1x50 | Faeces | | | | | Enter Amount |
| Sputum Containers | White Top | Each | M,C&S, AFB | | | | | Enter Amount |
| Myco-Trans Pack | N/A | Each | Skin, Hair, Nail Mycology | | | | | Enter Amount |
| Viral Swabs | Green Top | Each | General | | | | | Enter Amount |
| ENT Swabs | Orange Top | Each | ENT M,C&S | | | | | Enter Amount |
| Per-nasal Swabs | Blue Top | Each | Pertussis | | | | | Enter Amount |
| COBAS Chlamydia URINE | Yellow Top | Each | GC/Chlamydia PCR | | | | | Enter Amount |
| COBAS Chlamydia SWABS | Yellow Top | Each | GC/Chlamydia PCR | | | | | Enter Amount |
| Name of Requestor: |  | | | | | | | |
| **Please allow at least 24hrs before collection for Hospital/Wards** | | | | | | | | |
| **or at least 72hrs before collection for GPs** | | | | | | | | |
| **Please do not over order - There is a limited supply of stock at any given time.** | | | | | | | | |
| **In-house use: Completed Order Date:** | | Click or tap here to enter text. | | | **Initials:** | | Click or tap here to enter text. | |