WAKE FOREST UNIVERSITY MEDICAL GENETIC LABORATORIES
Department of Pediatrics, Medical Center Blvd., Winston-Salem NC

Request for Sample Collection Supplies - Media – Forms - Tubes

Physician / Hospital Office:_____

Address:_____

Attn: _____

Phone / FAX:_____

Type of Transport Media:

- ☐ POC /Tissue / Solid Tumor How many?_____
- ☐ Bone Marrow / Core How many?_____
- ☐ *Heparin:* How many?_____

Forms:

	Quantity
☐ DNA	
☐ Peripheral Blood	
☐ Cancer/Leukemia	
☐ FISH	
☐ Prenatal	
☐ POC / Tissues	
☐ L/S Ratio	
☐ MSAFP	

Collection Supplies:

	Quantity
☐ Centrifuge Tubes for amniocentesis	
☐ Amnio Trays	
☐ Red Top Vacutainer tubes	
☐ Green Top Vacutainer Tubes	
☐ Yellow Top Vacutainer Tubes	
☐ Purple Top Vacutainer Tubes	

Please FAX your reply / request to 336-716-2554.

If you have any questions please call 336-716-4321 Thank you for your assistance.