

Customer ID:	Social Security No.			
	Last Name			
	First Name			Middle Initial
	Date of Birth	Sex	Collection Date	Collection Time
	Patient Exposure History (Occupation, Diet, Hobby, Etc.)			
Bill: Client [] Prepaid []				

PLEASE CHECK NAME OR NUMBER AND SPECIMEN TYPE		For lab use only	
<u>Solvents & Metabolites</u>		<input type="checkbox"/>	Urine Bullet
[] (4402) Solvent Survey – (Bld & Ur)		<input type="checkbox"/>	Lavender Tube
[] (4075) Aromatic Solvents – (Bld)		<input type="checkbox"/>	Separator Tube
[] (4418) Aromatic Solvents – (Ur)		<input type="checkbox"/>	Plain Red Tube
[] (4420) BTX: Benzene-Toluene-Xylenes: (Bld)		<input type="checkbox"/>	Royal Blue
[] (4422) BTX: Benzene-Toluene-Xylenes: (Ur)		<input type="checkbox"/>	Serum Tube
[] (4050) Benzene: (Bld)		<input type="checkbox"/>	Urine Tube
[] (4342) Benzene OSHA Exposure: (Urine)		<input type="checkbox"/>	Misc. Ur. Cup
[] (4436) Ethylbenzene & Styrene Metab (Urine)		<input type="checkbox"/>	Acid-Ws Ur. Bullet
[] (4215) Ketones – (Bld)		<input type="checkbox"/>	Ur. Cont.
[] (5235) Ketones – (Urine)		<input type="checkbox"/>	Beta-2 Micro
<u>Pesticides & Herbicides</u>		<input type="checkbox"/>	Whole Blood
[] (5150) Organophosphate Pesticide Screen (Ur)		<input type="checkbox"/>	Slide
[] (5400) Trichlorpyridinol 3,5,6 – (Ur)		<input type="checkbox"/>	24-Hr Ur. Cont.
[] (5070) Organochlorine Pesticides – (Serum)		<input type="checkbox"/>	Plasma
[] (5020) Chlordane Exposure – (Serum)		<input type="checkbox"/>	Occult Blood
[] (5000) DDT – Exposure – (Serum)		<input type="checkbox"/>	Green Top Tube
<u>Trace Metals / OSHA Compliance</u>		<input type="checkbox"/>	Gray Top Tube
[] (3800) Heavy Metal Screen I – (Ur) (Arsenic Speciated, Lead, Mercury)		<input type="checkbox"/>	Frozen Urine
[] (3805) Heavy Metals I and Cadmium		<input type="checkbox"/>	Frozen Serum
[] (3830) Cadmium Exposure (Beta-2 Microglob., CD Blood, CD Urine)		<input type="checkbox"/>	Frozen Plasma
[] (3998) Blood Lead and ZPP		<input type="checkbox"/>	Cadmium Tube
[] (3810) Heavy Metals Screen – (Bld)		<input type="checkbox"/>	Initials
[] (3080) Chromium – (Ur)			
[] (3160) Mercury – (Ur)			
[] (3840) Cadmium Exposure + Lead ZPP			
Supply Request Please list any supplies needed:	Chain-Of-Custody		
	Released:	Received:	Date:
	_____	_____	_____
	_____	_____	_____