



Renal Pathology & Electron Microscopy

## Supply Order Form

Requesting Physician's Office: \_\_\_\_\_

Address, City, State, Zip Code: \_\_\_\_\_

Phone: \_\_\_\_\_

Date of Request: \_\_\_\_\_

	<p>Renal Biopsy Kit Description:</p> <ul style="list-style-type: none"> <li>• 20 ml Vial Michel's Solution</li> <li>• 20 ml Vial 10% NBF</li> <li>• 7 ml Vial 2.5% glutaraldehyde in 0.1M NaCacodylate</li> <li>• Plastic Forceps</li> <li>• Sterile, disposable Scalpel Blade with Guard</li> <li>• 8X10 Biohazard Bag</li> <li>• 3 Part Specimen Order Form</li> <li>• Instruction Sheet</li> <li>• FedEx Lab Pak &amp; Standard Overnight Shipping Label</li> </ul>	<p>Quantity Needed:</p>
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Please fax your completed supply order form to Pam Clark at (203) 785-3348  
 Or  
 email to [pamela.clark@yale.edu](mailto:pamela.clark@yale.edu)