

NOTE: This serves as a guide to design the custom pack that best meets your needs. Please provide as much information as possible to ensure accuracy. Please submit this form and you will receive a free sample and a quote in approximately three weeks.

CUSTOMER NUMBER _____ REPRESENTATIVE NAME _____

PRACTICE NAME: _____ CONTACT _____

ADDRESS: _____

CITY/STATE/ZIP _____

PHONE: _____ FAX: _____ CELL NUMBER: _____

PACK DESIGN: QTY ITEM	DESCRIPTION (click & list brand if preference)			
Table Cover	44x44 50x90	44x78 Other:	40x90	
Patient Drape				
Drape	60x44	76x60	Other:	
Utility Drape	Describe:			
Mayo Stand. Cover	23x55w/cuff	Other:		
Esmark	Size:			
Self Adherent Band.	Size:			
Stockinette	Size:			
Bandage	Size:			
Cast Pad Webril	Size:			
Kerlix	Size:			
Underpad	Size:			
Marker/Labels				
Bi Polar Cord				
Connective Tube	6'x¼	10'x¼	12'x¼	Other:
Xeroform				
Light Handle. Cover	Describe:			
Bag Disposable	Suture	10gal	1gal	Other:
Cup	2oz.	4oz.	lid	Other:
Bowl	Size:			
Basin	Size:			
Rondic™ Sponge	Size:			
Gauze Rolls	Size:			
Gauze	2x2	4x4	Other:	
Sponge Lap	18x18	Other:		
Spinal Needle	Size:			
Needle	Size:			
Needle Counter	10ct	20ct	40ct	
	Foam	Mag	Other:	

PACK DESIGN: QTY ITEM	DESCRIPTION (click & list brand if preference)			
Syringe	Size:			
Bulb Syringe				
Blade	Size:	Type:		
Scalpel	Size:	Type:		
Probe/Wand Cover	Size:			
Yankauer	Non Vent	Vent	Other:	
Cauty Rocker				
Cauty Pencil				
Gown	Size:	Type:		
Towel Absorbent				
Towel Blue Cloth				
Towel Clamp				
Mask, Face				
Cap	Surgeon	Bouffant	Other:	
Shoe Cover				
Gloves, Surgical	Size:	Brand	PF	
Preparation Tray				
CSR Wrap	20x20	24x24	30x30	Other:
Prep Tray	3-Comp	2-Comp	Other:	
Tray	5x4x2	9x5x2	Other:	
Sponge Stick	Describe:			
PVP Scrub	3oz Btl.	Other:		
Chloraprep	3oz.	10.5mL	26mL	Other:
Duraprep	3oz.	10.5mL	26mL	Other:

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ADDITIONAL ITEMS

ADDITIONAL INFORMATION (enter below)

What is the surgical procedure? _____ How many packs will be used per month? (estimate) _____

Who is your current pack supplier? _____ Do you pull separate sterile items for this procedure? _____

What is important in a surgical pack to you? _____

To design your custom pack, please contact your Henry Schein Sales Consultant or e-mail us at surgiteam@henryschein.com To Fax: 1.631.454.3145 24 Hrs