

McLaren Print System Order

Order No: 73899 Reprint Previous Order No: 56955
 Order Date: 2022-12-02
 User: Pamela Sweeney
 Phone: 989-269-9521

Ship Location: McLaren Thumb Region
 1100 Van Dyke
 Bad Axe, MI 48413

Forms

Quantity: 100
 Paragon Dept No: 30670
 Dept Name: OB
 Company Number: 530

Order Total Price: 0.00

Item Number: 050.OR.130
 Item Description: Ambulatory-I & O - Surgical Recovery Room Charges, Misc Supplies
 Revision Date: 06/2018
 Print: 2 sided black and white
 Paper: 20# White Text
 Size: 8.5 x 11
 Fold:
 Finish: None
 Drill: None
 Misc Info: ds; black & White; Bond

McLaren Thumb Region
 AMBULATORY I & O SURGICAL
 RECOVERY ROOM CHARGES
 MISCELLANEOUS SUPPLIES

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		ROOM TIME	SURGERY TIME
		IN _____	BEGAN _____
		OUT _____	ENDED _____
		DATE _____	ANES _____
		SURGEON _____	
		PRE-OP _____	
		POST-OP _____	
		PROCEDURE _____	
		PERSONNEL _____	OR RM# _____
		Ambulatory Surgery [] 0300036	
		First 1/2 hr in OR [] 0300035	
		Document # of 1/2 hr increments after first 1/2 hr _____	31118-3
		First 1/2 hr in Rec. Rm [] 0300277	
		Document # of 1/4 hr increments after first 1/2 hr _____	31116-7
		First 1/2 hr in Exam Rm [] 300053	
		Document # of 1/2 hr increments after first 1/2 hr _____	31117-5
		[] 1400019 Unidynamica	[] 321232 Urine flow measurement
Laser		[] Check w/ Materials Management for additional charges	
CO2 (EMT) ... 302448		500542 Blades x _____	500535 Pincuse x _____
Holium (Stone) ... 304261		300871 Suture x _____	303677 Closure Wire x _____
Naviga KTP (PVP) ... 326062		500980 Ortho Staple x _____	303685 K Wire x _____
Path Tissue: _____	Sponges: _____	500923 Stockinette x _____ ft.	301564 JCR Office Lens x _____
Normal: _____	Instruments: _____	500915 OCL Splint 12" x _____	303370 HMC Consignment Lens x _____
Wound: _____	Needles: _____	500907 Plaster Splint 12 thickness x _____	
Urine: _____	Drains/Packs: _____	500818 Cast Padding for Plaster Rolls x _____	
Post-Op Condition: _____	Other: _____	500808 Cast Padding for Fiberglass Rolls x _____	