

McLaren Print System Order

Order No: 84230
Order Date: 2024-04-02
User: Sarah Plocharczyk
Phone: 586-493-1741

Ship Location: McLaren Macomb-CSR
1000 harrington
Mt. Clemens, mi 48043

Forms
Quantity: 1000
Paragon Dept No: 28550-1175
Dept Name: Sterile Processing
Company Number: 260

Order Total Price: 31.00

Item Number: MHCC-741
Item Description: Loaner Tracker Form
Revision Date: 02/2024
Print: 1 sided black and white
Paper: 20# White Text
Size: 8.5 x 11
Fold:
Finish: None
Drill: None
Poster:
Misc Info: SS, Black



LOANER TRACKING FORM

| | |
|--------------------|--------------|
| Today's Date/Time | Date of Case |
| Surgeon | Patient |
| Vendor | Procedure |
| Req Name/Signature | Contact |

Inventory Sheet: Y N Cleaning/Sanitization Instructions: Y N

CSR Tech Signature _____ Case _____ of _____

Tag Identifier

System Name _____

| Tray Names | COMPLETE | IMPLANTS | OPEN |
|------------|----------|----------|------|
| 1 | Y N | Y N | Y N |
| 2 | Y N | Y N | Y N |
| 3 | Y N | Y N | Y N |
| 4 | Y N | Y N | Y N |
| 5 | Y N | Y N | Y N |
| 6 | Y N | Y N | Y N |
| 7 | Y N | Y N | Y N |
| 8 | Y N | Y N | Y N |
| 9 | Y N | Y N | Y N |
| 10 | Y N | Y N | Y N |
| 11 | Y N | Y N | Y N |
| 12 | Y N | Y N | Y N |

Spec Info:

Loaner Open: _____ # Loaner DND: _____

TOTAL # OF TRAYS

COMMENTS/SPECIAL INSTRUCTIONS _____