BioTek **reMEDys**

IVIG MEDICAL SUPPLY LIST

Patient Name:_____

Order Date:_____ Next Infusion Date:_____

SUPPLIES	NEED (#):
Adhesive Remover Wipes	
Alcohol Swab stick	
No Sting Barrier Wipes	
Cormix Bags	
Clave Connecter Male Luber Lock	
Biopatch disk	
Batteries (PLEASE SPECIFY)	
9 v _____ or C _____	
Blue Caps	
Pump Pouch	
Coban Wrap	
Heparin Flushes	
Saline Flushes	
Disposable Blue Pads	
Dressing sterile 4x4	
Dressing change kit	
Mini Transfer Pin	
Mini-Spike Dispensing Pin	
IV Pole	
IV start kit	
Sharps container 2 gallon	
Iodine Swabs	
Stat-Lock IC PICC plus foam	
Swabcap Xt Access Valve Disinfect	
Micropore tape 1Inx10yd	
Transpore tape 1Inx10yd	
Vented Spike adapter	

BULK ITEMS	NEED (#):
Alcohol Prep Pads	
Band-Aids	
Gauze 2x2 12-Ply Sterile	
Small GLOVES	
Medium GLOVES	
Large GLOVES	
X-Lagre GLOVES	

HUBER NEEDLES	NEED (#):
20Gx1"	
20Gx3/4"	
22Gx1"	
22Gx1.5" 1Y site	
22Gx3/4"	

EXT SET	NEED (#):
12" Smallbore w/mic	
60 IN w/luber lock	
7" w/microclave	
8" small bore w/ultrasite	
Cath y-type	
Clearlink 1.2M filter 19"	
Trifuse 4" w/clamps	

ANGIOCATH	NEED (#):
BD Autogaurd 22Gx1"	
BD Autogaurd Wing 24Gx3/4"	
BD Intima 24Gx1"	
Braun Introcan 22Gx1"	
Braun Introcan 24Gx3/4"	
Cath 24Gx3/4"	
Insyte-N Autog 24Gx1"	
PV Cath 20Gx1.16"	

TUBING	NEED (#):
Admin Set No filter flow rate	
Admin set 92" Clearlink	
Admin set 92" .22 Flowreg	
Admin set CADD 1.2 Filter	

PRE-MEDS	NEED (#):
Diphenhydramine	
25 mg ____ (IV or PO)	
50 mg ____(IV or PO)	
Mapap	
325 mg ____	
500 mg ____	
Zofran	
Zantac	
25 mg ____	
50 mg ____	
Ketorolac	

DRESSING	NEED (#):
Aquagaurd 10x12 IN	
Mepilex Lite 4x4 IN	
Opsite 3000 4x5.5 IN	
Primapore 2x3 IN	
Primapore 4x31/8 IN	
Sorbaview 3.75x5 IN	
Sorbaview 4x7 IN	
Tegaderm 2 3/8 x 2.7 IN	
Tegaderm Plus 3.5X5 IN	
Tegaderm Frame 2x2.7 IN	

OTHER SUPPLIES	NEED (#):

NOTES:_____

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