CUSTOM ORDER: STERILE LABELS

Key Surgical® Sterile Labels are designed to identify and record medications, medication containers and other solutions before, during, and after surgery. These versatile labels are packaged sterile and sold 100 packages per box. For current customization pricing, please contact your Key Surgical Sales Representative. Please go to www.keysurgical.com for a listing of our standard labels.

Custom: Sterile Labels can be printed with any color you would like in the background of the heading of each label. Labels are available with 1 panel (10 labels), 2 panels (20 labels), 3 panels (30 labels), or 4 panels (40 labels) per sterile package. Both panel options are sold in a minimum of 100 sterile packages per box.

Sterile Labels have a shelf life of three years from the date of manufacture.

To begin the order process, please fill out this custom order form and return it to Key Surgical by fax at 952.914.9866 or email at order@keysurgical.com. Include a valid email address or fax number so we can send a proof for your approval. The proof will be sent approximately 10 days after order placement.

If you have any questions, please contact us at 800.541.7995 or info@keysurgical.com.

Date:	Contact Name (proof to be sent to):		Email:	
Customer ID:	Customer Name:		Fax:	Phone:

For Key Surgical Use Only
Custom Request #:

SALE-4004, Revision F, 14 April 2017

All valid documents can be found in Grand Avenue Software (GAS).
Verify that this document is the current revision in GAS before use.

CUSTOM ORDER: STERILE LABELS

KEYSURGICAL®

To begin your custom order of Key Surgical Sterile Labels, enter your label information in the boxes below. Each line's font size will get progressively smaller, as the line number increases in numerical order (i.e. Line 1 will be a larger font size than Line 2; Line 2 will be larger than Line 3). In general, Line 2 references "Strength _____" and Line 3 "AMT: EXP. TIME: ." Any reference to Epi is usually in red, so please indicate if your preference is something different.

How many panels would you like in each sterile package?   [ ] 1 Panel   [ ] 2 Panels   [ ] 3 Panels   [ ] 4 Panels

Color: Insert RGB number if known.

Panel _____

Text

Label 1	Line 1	
Color:	Line 2	
	Line 3	
Label 2	Line 1	
Color:	Line 2	
	Line 3	
Label 3	Line 1	
Color:	Line 2	
	Line 3	
Label 4	Line 1	
Color:	Line 2	
	Line 3	
Label 5	Line 1	
Color:	Line 2	
	Line 3	
Label 6	Line 1	
Color:	Line 2	
	Line 3	
Label 7	Line 1	
Color:	Line 2	
	Line 3	
Label 8	Line 1	
Color:	Line 2	
	Line 3	
Label 9	Line 1	
Color:	Line 2	
	Line 3	
Label 10	Line 1	
Color:	Line 2	
	Line 3	

Panel _____

Text

Label 11	Line 1	
Color:	Line 2	
	Line 3	
Label 12	Line 1	
Color:	Line 2	
	Line 3	
Label 13	Line 1	
Color:	Line 2	
	Line 3	
Label 14	Line 1	
Color:	Line 2	
	Line 3	
Label 15	Line 1	
Color:	Line 2	
	Line 3	
Label 16	Line 1	
Color:	Line 2	
	Line 3	
Label 17	Line 1	
Color:	Line 2	
	Line 3	
Label 18	Line 1	
Color:	Line 2	
	Line 3	
Label 19	Line 1	
Color:	Line 2	
	Line 3	
Label 20	Line 1	
Color:	Line 2	
	Line 3	

Fax or email this form to **952.914.9866** or **order@keysurgical.com**.

For Key Surgical Use Only				
Item #:	**Custom Request #:**	**DCR / DEVIATION #:**	**Key PO #:**	**[ ] Proof Approval Received** **Date:**

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