



825 North Rutledge Street • Springfield, Illinois 62702-4910 • [www.dph.illinois.gov](http://www.dph.illinois.gov)

DIVISION OF LABORATORIES  
FOODBORNE ILLNESS KITS  
**LOCAL HEALTH DEPARTMENT REQUISITION FORM**

The following items should be in your foodborne illness kit. In the blank box, prior to the item, please indicate how many items you need to re-order from the lab.

Amount you are requesting	Items that should be in your kit	Amount required in kit
Not Provided by IDPH Labs	Cooler, Large	1
	Ice Chips (Insul-Ice)	15 lb
	Whirl-Pak Bags, 24 oz.	20 bags
	Sterile sample Scoop	10 scoops
	Sterile Sample Spoon	10 spoons
	Whirl-Pak Bags, 69 oz	5 bags
Not Provided by IDPH Labs	Dial-Type Metal Stemmed Thermometer 0-2200F	2
	Alcohol Swabs	100
Not Provided by IDPH Labs	Felt-tip markers	1
	Scotch Magic Tape	1
	Utility scissors	1
	Hairnets, 100 per pkg	1 pkg
	Disposable gloves, 100 per box	1 box
	Paper thermometers, 25 per pkg	1 pkg
	Iodine test strips, 200 per pkg	1 pkg
	QAC test strips, 100 per pkg	1 pkg
	Sterile Scalpels	10
	DPD Chlorine Test Pkt, 100 per pkg	1 pkg
	Spongesicle, sterile	10
	D/E Neutralizing Solution*	10
	RediSwab (D/E Neutralizing solution)*	10
	Evidence Tape	1 roll
	Whirl-Pak Bags, 184 oz	5
	Plastic Evidence Bags, 9 X 11 for paperwork	5

Date of Request: \_\_\_\_\_

Agency: \_\_\_\_\_

Attention: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**SUBMIT ORDER VIA:**

*Telephone 217-782-6562*

*Fax 217-524-7924*

*Email: [dph.labs.env.micro@illinois.gov](mailto:dph.labs.env.micro@illinois.gov)*

OR

*Mail this form to:*

*Illinois Department of Public Health*

*Division of Laboratories*

*825 N Rutledge Street*

*Springfield, IL 62702*

**IMPORTANT:** \*Prepared media that has an expiration date should be stored under refrigeration until use.

Check your stock on hand periodically for expiration.

**NOTE:** Keep Ice Chips (Insul-Ice) frozen for use.

**PROTECTING HEALTH, IMPROVING LIVES**

*Nationally Accredited by PHAB*

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