



**LABELLING SYSTEMS
PRODUCT CATALOGUE**

FREE PHONE 0800 TRIARC (874272)
www.triarc.co.nz

Welcome to the Triarc Medical Labelling System Product Catalogue

Triarc Medical has been driving innovation for over 30 years with our quality labels and dispensers for the medical environment worldwide.

We hope you enjoy browsing through this comprehensive product catalogue, which gives some insight into the range we do.

The Company

Triarc Medical is a family-owned business which develops and supplies colour coded medical label systems into the medical and pharmaceutical environments worldwide. Triarc was established in the 1980's to produce a safe and convenient system for the labelling of Anaesthetic Drug Syringes. Triarc serves both local and international markets through its network of global distributors.

The Products

Triarc Medical promotes patient safety and manufacture our anaesthetic syringe labels in accordance with the AS/NZS4375:1996 & ISO26825:2020 standards. We also produce labels for the Australian National Standard for 'User-applied Labelling of Injectable Medicines, Fluids and Lines'. These standards set out the requirements to reduce the risk of patient harm and help healthcare professionals. With over 10,000 pre-printed labels Triarc Medical has an extensive range to fulfil your needs. Triarc supply sterile label packs that are ready to use. We can customise your own selection of labels into individual pouches and sterilise them by Ethylene Oxide.

Triarc has developed a top quality label dispenser which is an integral part of the efficient, safe Triarc Medical Labelling System. The unique modular design gives you flexibility to configure your label bank exactly the way you need it to be.

The Service

Our primary focus is to have quality products available when you require them. To this end, we are committed to stocking a large range of commonly used labels which are available by overnight courier. We also produce custom printed labels with short lead times

The Care

Our Customer Service can help for any orders or enquiries you may have.



Phone: 0800 874 272
TRIARC

or 06 878 5420



Email: sales@triarc.co.nz

Web: www.triarc.co.nz

Quote

Within 24 hours

Proof

Within 48 hours

Custom
Printed Item

Dispatch within 10 days
from proof approval

Or

Stock Item

Despatch within 24 hours



Label Dispensers



THE PERFECT ANSWER TO A STICKY PROBLEM

The unique, modular design of the Triarc Medical Label Dispenser gives you more flexibility to configure your label bank exactly the way you need it to be.

- assorted widths
- fully enclosed
- easy reloading
- auto dispensing or tear & peel
- wall mounted or free standing
- horizontal or vertical stacking

Triarc Label Dispenser Sizes & Dimensions - TLD Range		
Code	Description	Dimensions (mm)
TLD15	DISPENSER - PLASTIC MODULAR 15MM WIDTH	128(l) x 134(h) x 20(w)
TLD25	DISPENSER - PLASTIC MODULAR 25MM WIDTH	128(l) x 134(h) x 30(w)
TLD35	DISPENSER - PLASTIC MODULAR 35MM WIDTH	128(l) x 134(h) x 40(w)
TLD45	DISPENSER - PLASTIC MODULAR 45MM WIDTH	128(l) x 134(h) x 50(w)
TLD55	DISPENSER - PLASTIC MODULAR 55MM WIDTH	128(l) x 134(h) x 60(w)
TLD65	DISPENSER - PLASTIC MODULAR 65MM WIDTH	128(l) x 134(h) x 70(w)
TLD75	DISPENSER - PLASTIC MODULAR 75MM WIDTH	128(l) x 134(h) x 80(w)
TLD85	DISPENSER - PLASTIC MODULAR 85MM WIDTH	128(l) x 134(h) x 90(w)
TLD105	DISPENSER - PLASTIC MODULAR 105MM WIDTH	128(l) x 134(h) x 110(w)
TLD115	DISPENSER - PLASTIC MODULAR 115MM WIDTH	128(l) x 134(h) x 120(w)
TLD125	DISPENSER - PLASTIC MODULAR 125MM WIDTH	128(l) x 134(h) x 130(w)

Note: The backing paper width needs to be at least 1mm less, than the dispenser width

For wider widths please contact us

Takes outer roll diameter up to 110mm

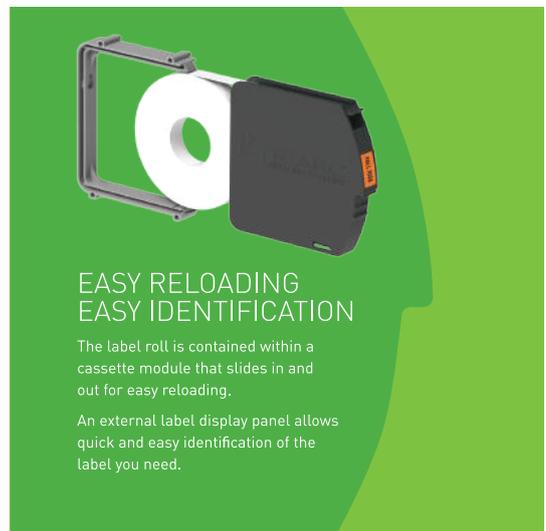
Auto Peel



Tear and Peel



STACK MOUNT EXPAND



EASY RELOADING EASY IDENTIFICATION

The label roll is contained within a cassette module that slides in and out for easy reloading.

An external label display panel allows quick and easy identification of the label you need.



As per the AS/NZS 4375 : 1996 & ISO 26825 : 2020 Standards
for User-applied labels for syringes containing drugs used during anaesthesia

Induction Agents	
Thiopentone mg/ml	R01
Methohexitone mg/ml	R02
Propofol mg/ml	R03
Ketamine mg/ml	R04
Etomidate mg/ml	R04A
Perfantin mg/ml	R04B

Muscle Relaxants	
Atracurium mg/ml	R06
Pancuronium mg/ml	R09
Vecuronium mg/ml	R10
Suxamethonium mg/ml	R11
Muscle Relaxant	R12
Rocuronium mg/ml	R12B

Muscle Relaxants	
Mivacurium mg/ml	R12C
Cisatracurium mg/ml	R12D

Relaxant Reversals	
Neostigmine mg/ml	R13
Physostigmine mg/ml	R27
Sugammadex mg/ml	M0626

All codes are supplied as a roll of 500 labels

As per the AS/NZS 4375 : 1996 & ISO 26825 : 2020 Standards
for User-applied labels for syringes containing drugs used during anaesthesia

Anticholinergic	
Atropine mg/ml	R14
Glycopyrrolate mg/ml	R15
Glycopyrronium mg/ml	R15N

Narcotic	
Alfentanil mcg/ml	R16
Narcotic	R16A
Fentanyl mcg/ml	R17
Morphine mg/ml	R18
Omnopon mg/ml	R19
Pethidine mg/ml	R20
Opioid	R20A
Papaverine mg/ml	R21A
Remifentanil mcg/ml	R21C

Narcotic	
Tramadol mg/ml	R21D
Physeptone mg/ml	R21E
Oxycodone mg/ml	R21F
Hydromorphone mg/ml	R21G
Fentanyl 1000ug / 50ml N/S	RAH17

Narcotic Antagonist	
Naloxone mg/ml	R22

Tranquillisers	
Diazepam mg/ml	R23
Midazolam mg/ml	R25
Phenytoin mg/ml	R25B

Tranquilliser Antagonist	
Flumazenil mg/ml	R26

Local Anaesthetics	
Bupivacaine %	R28
Lignocaine %	R29
Lidocaine %	R29N
Prilocaine %	R30
Ropivacaine %	R30A
Local Anaesthetic mg/ml	R30C
Levobupivacaine %	R30D
Bupivacaine (Adr) %	R31
Lignocaine (Adr) %	R32
Prilocaine (Adr) %	R33

Vasopressors	
Adrenaline	R34
Milrinone mg/ml	R34A

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As per the AS/NZS 4375 : 1996 & ISO 26825 : 2020 Standards
for User-applied labels for syringes containing drugs used during anaesthesia

Vasopressors	
Noradrenaline	R35
Ephedrine mg/ml	R36
Dopamine mg/ml	R37
Dobutamine mg/ml	R38
Metaraminol mg/ml	R39
Neosynephrine mg/ml	R39A
Phenylephrine mcg/ml	R39B
Vasopressor	R39C

Hypotensive Agents	
Nitroprusside	R40
Nitroglycerin mg/ml	R41
Glyceryl Trinitrate mg/ml	R43A
Phentolamine mg/ml	R43B

Hypotensive Agents	
Dipyridamole mg/ml	R43C
Nimodipine mg/ml	R43D
Hydralazine	R43E
Hypotensive Agent	R43F
Clonidine mcg/ml	R43G

Beta Blocker	
Labetalol mg/ml	R44
Metoprolol mg/ml	R45
Propranolol mg/ml	R46
Beta Blocker	R47
Esmolol mg/ml	R47A

Anti-Arrhythmic	
Amiodarone mg/ml	R48

Anti-Arrhythmic	
Digoxin mcg/ml	R50
Isoprenaline mg/ml	R51
Verapamil mg/ml	R52
Adenosine mg/ml	R52A
Antiarrhythmic	R52B

Bronchodilators	
Aminophylline mg/ml	R53
Salbutamol mg/ml	R54

Antiemetics	
Droperidol mg/ml	R24
Metoclopramide mg/ml	R55
Stemetil mg/ml	R56
Buscopan mg/ml	R56A

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As per the AS/NZS 4375 : 1996 & ISO 26825 : 2020 Standards
for User-applied labels for syringes containing drugs used during anaesthesia

Antiemetics	
Ondansetron mg/ml	R56B
Antiemetic	R56C
Tropisetron mg/ml	R56D
Cyclizine mg/ml	R56E
Granisetron mg/ml	R56F
Medetomidine	R56G

Electrolytes	
Calcium	R64A
KCl mmol/ml	R65
KH ₂ PO ₄	R66A
Saline	R67
Mg SO ₄	R67A
Magnesium	R67B

Miscellaneous	
Fentanyl Midazolam	CM17/25
Morphine Midazolam	CM18/25
Neostigmine Atropine	HK13/14
Neostigmine Glycopyrrolate	HK13/15
WATER for inj.	M0001
Antibiotic	M0003
Antibiotic	M0003RP
Cephazolin	M0003C
_____mg/ml	M0004
	M0014
Dexamethasone mg/ml	M0044
Tranexamic Acid	M0087
Parecoxib	M0620

Ecobolics	
Ergometrine	R57
Oxytocin iu/ml	R58
Syntometrine	R59

Miscellaneous	
Insulin _____u	R60
Heparin iu/ml	R61
Heparin iu/ml	HW61
Hep. Saline iu/ml	R61A
Protamine mg/ml	R62
Frusamide mg/ml	R73

Electrolytes	
Calcium Chloride	R63
Calcium Gluconate	R64

All codes are supplied as a roll of 500 labels

Sterile Label Packs



SP0004 Vinyl/Waterproof
1 label per pack



SP0008 Vinyl/Waterproof
1 label per pack



SP0011 Vinyl/Waterproof
1 label per pack



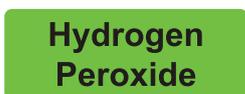
SP0013 Vinyl/Waterproof
1 label per pack



SP0014 Vinyl/Waterproof
1 label per pack



SP0015 Vinyl/Waterproof
1 label per pack



SP0016 Vinyl/Waterproof
1 label per pack



SP0018 Vinyl/Waterproof
1 label per pack



SP0019 Vinyl/Waterproof
1 label per pack



SP0020 Vinyl/Waterproof
1 label per pack



SP0021 Vinyl/Waterproof
1 label per pack



SP0023 Vinyl/Waterproof
2 labels per pack



SP0084 Vinyl/Waterproof
3 labels per pack



SP0039 Paper
1 label per pack



SP0040 Paper
1 label per pack



SP0043 Paper
1 label per pack



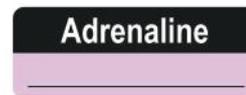
SP0044 Paper
1 label per pack



SP0047 Paper
1 label per pack



SP0050 Paper
1 label per pack



SP0051 Paper
1 label per pack



SP0052 Vinyl/Waterproof
1 label per pack



SP0053 Vinyl/Waterproof
1 label per pack



SP0088 Vinyl/Waterproof
3 labels per pack

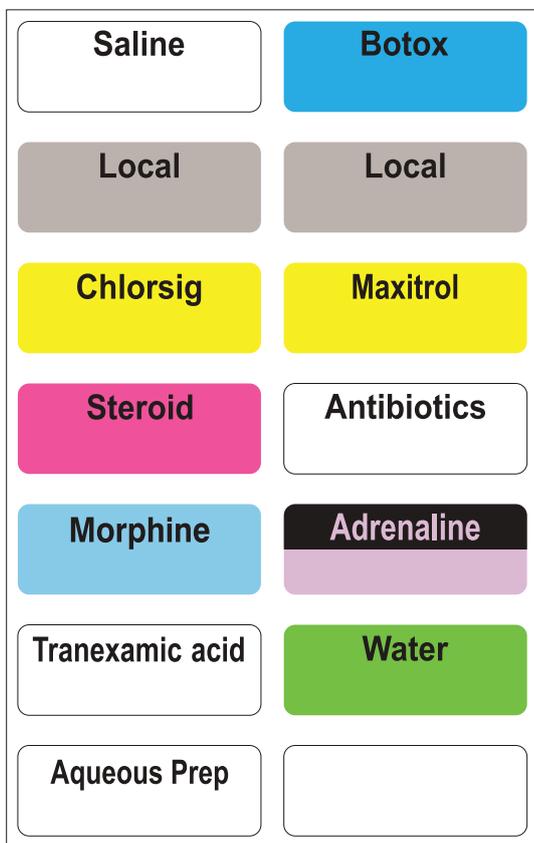


SP0115 Paper
1 label per pack



SP0116 Paper
1 label per pack

• Sterilised by ethylene oxide in individual pouches. • Customise your own selection of labels for your requirements.



SP0107 Vinyl/Waterproof
14 labels per pack



SP0108 Vinyl/Waterproof
14 labels per pack



Sterile Label Packs

Contrast	Heparin iu/ml	Saline	Adrenaline
Bupivacaine 0.5%	Bupivacaine 0.25%	Bupivacaine 0.5% Adrenaline	Bupivacaine 0.25% Adrenaline
Ropivacaine 0.2%	Ropivacaine 0.75%	Ropivacaine 1%	Steroid
Tranexamic Acid	Gentamicin mg/ml	Cephazolin	Aqueous Betadine

SP0117
20 labels per pack

Paper

Antiseptic	Antiseptic
Local Anaesthetic	Local Anaesthetic
0.9% Sodium chloride	0.9% Sodium chloride
Heparin	Contrast
Adrenaline	Steroid
Antibiotic	Miochol
BSS	WATER

SP0069
16 labels per pack

Vinyl/Waterproof

Medicine
Conc (units/mL)
Medicine
Conc (units/mL)
Medicine
Conc (units/mL)
Medicine
Conc (units/mL)
Medicine
Conc (units/mL)

SP0068
5 labels per pack

Vinyl/Waterproof
Removable Adhesive

- Sterilised by ethylene oxide in individual pouches.
- Customise your own selection of labels for your requirements.



Colour Coding & Dot Labels

C02 WHITE	RC02 (REMOVABLE) WHITE	C03 LIGHT BLUE	C04 MID BLUE	C05 DARK BLUE		
C06 SALMON	C07 MID GREEN	C08 DARK GREEN	C09 LIGHT GREEN	C10 BRIGHT YELLOW		
C11 GOLDEN YELLOW	C14 ORANGE	C16 PURPLE	C17 MAGENTA	C18 MAUVE		
C19 PINK	C20 RED	C21 GREY	C22 VIOLET	C25 TEAL		
CR01 RADIANT RED	CR02 RADIANT ORANGE	CR03 RADIANT PINK	CR04 RADIANT GREEN	CR05 RADIANT YELLOW		
JCR02 RADIANT ORANGE 1000/BOX	JCR04 RADIANT GREEN 1000/BOX	RRP60X20 (REMOVABLE ADHESIVE) 500/BOX				
BKD14 BLACK 1050/BOX	BD14 BLUE 1050/BOX	GD14 GOLD 650/BOX	GRD14 GREEN 1050/BOX	LPD14 LIGHT PURPLE 1050/BOX	ND14 NAVY 1050/BOX	OD14 ORANGE 1050/BOX
PD14 PURPLE 1050/BOX	PID14 PINK 1050/BOX	RD14 RED 1050/BOX	WD14 WHITE 1200/BOX	YD14 YELLOW 1050/BOX	RGD14 RAD. GREEN 700/BOX	ROD14 RAD. ORANGE 700/BOX
BD24 500/BOX	GRD24 500/BOX	OD24 500/BOX	RD24 500/BOX	YD24 500/BOX		
RGD30 1000/BOX	ROD30 1000/BOX	RPD30 1000/BOX	RRD30 1000/BOX	RYD30 1000/BOX		

ALL 14mm AND 24mm DOTS ARE REMOVABLE ADHESIVE

ALL 30mm DOTS ARE PERMANENT ADHESIVE



Slimline Food Labels

VEGETARIAN K01	DIABETIC K02	LOW FAT K03	VEGAN K06	CHICKEN K08
LAMB K09	HAM K10	SALMON K11	BEEF K12	CORNBEEF K13
PORK K16	BACON K19	TUNA K20	SEAFOOD K21	SMOKED CHICKEN K23
SMOKED SALMON K24	DAIRY FREE K25	MINCE K27	MINCE & CHEESE K28	EGG K29
CHEESE K30	GLUTEN FREE K31	CHEESE & PINEAPPLE K32	CHEESE & ONION K33	FOOD ALLERGY K36

Slimline Medical Labels

ARTERIAL ___/___/___ M0005	 M0014	M. R. S. A. M0016	CAUTION - DUPLICATE NAME M0017	ANAESTHETIC ALERT M0018
FALL RISK M0019	HEP. B POS. M0029	ALLERGY M0034	HEARING IMPAIRED M0035	ALERT M0040
ALERT M0040RY	DATE ___/___/___ M0041	MAINTENANCE M0042	T.P.N. M0043	DIABETIC M0048
THROAT PACK M0049	Reversal M0053	CONTRAST M0054	CONTRAST M0054BG	CONTRAST M0054RP
DILUTE CONTRAST M0055	SIGHT IMPAIRED M0059	ADVERSE REACTION M0066	MEDIC ALERT M0070	SENSITIVITY M0073
IV Flush M0079	IV Flush M0079RG	DATE ___/___/___ TIME ___/___/___ M0080	DRUG ALERT M0083	C.V.P. M0092
Clonidine mcg/ml M0095	DIETITIAN M0115	Na Cl 0.9% M0117	PLEASE SIGN CONSENT M0121	OCCUPATIONAL THERAPY M0123
DIABETES NURSE M0124	ARTERIAL M0125	FORMALIN M0126	PHYSIO M0128	OCC THERAPY M0129

All codes are supplied as a roll of 500 labels

Slimline Medical Labels

SLT M0130	NUTRITION M0138	DIETITIAN M0139	SOCIAL WORK M0140	NURSE M0141
PSYCHOLOGY M0142	PHYSIOTHERAPY M0143	SPEECH LANGUAGE THERAPY M0144	SOCIAL WORK M0149	MEDICAL M0150
NURSING M0151	SPEECH LANGUAGE THERAPY M0153	ACUTE PAIN SERVICE M0157	OCCUPATIONAL THERAPY M0159	DIETITIAN M0170
PAEDIATRIC M0175	PSYCHOLOGY M0176	INFECTION CONTROL M0177	N A S C M0178	GENTAMICIN M0179
KEFZOL M0180	DOUBLE STRENGTH M0185	BREASTFEEDING M0202	DISCHARGE PLANNING M0208	WOUND CARE M0220
PALLIATIVE CARE M0223	REHABILITATION M0238	MDT MEETING M0239	P.C.A. M0255	Consignment M0259
CONTACT PRECAUTIONS M0265	Heparin 5000u M0274	FORTIFIER ADDED M0275	SUNDAY M0295	MONDAY M0296
TUESDAY M0297	WEDNESDAY M0298	THURSDAY M0299	FRIDAY M0300	SATURDAY M0301
DIABETES M0326	FAMILY CONTACT M0327	FALL RISK M0328	CAUTION - DUPLICATE NAME M0332	Dynastat M0344
LACTATION CONSULTANT M0368	EPIDURAL M0370	WOUND SURVEILLANCE M0385	PAIN MANAGEMENT M0401	SPECIMEN TAKEN & SENT M0410
OMNIPAQUE 300 M0417	M.R.S.A. ALERT M0418	ALERT Patient on Anticoagulant M0421	OUT OF DATE M0422	DO NOT INJECT M0466
INSULIN ALERT M0473	FALL RISK M0475	Haloperidol mg/ml M0476	Spinal Morphine M0481	ALLERGY/ DRUG REACTION M0484
INPATIENT M0502	E. S. B. L. ALERT M0509	0.9% Saline M0516	PSYCHIATRIST M0526	NKDA M0527

All codes are supplied as a roll of 500 labels



Slimline Medical Labels

CONSENT M0553	RETURN TO PATIENT M0561	PARACETAMOL M0565	Infection Prevention & Control M0569	infectious diseases ALERT M0585
Dexmedetomidine M0667	Vasopressin M0676	EXPIRES IN JANUARY M0733	EXPIRES IN FEBRUARY M0734	EXPIRES IN MARCH M0735
EXPIRES IN APRIL M0736	EXPIRES IN MAY M0737	EXPIRES IN JUNE M0738	EXPIRES IN JULY M0739	EXPIRES IN AUGUST M0740
EXPIRES IN SEPTEMBER M0741	EXPIRES IN OCTOBER M0742	EXPIRES IN NOVEMBER M0743	EXPIRES IN DECEMBER M0744	CRUSHED MEDS M0781

Slimline Endoscopy Labels

ASCENDING OP0037	CAECUM OP0050	HEPATIC FLEXURE OP0136	RECTO SIGMOID OP0198	RECTUM OP0200
RIGHT COLON OP0214	SIGMOID OP0231	SPLENIC FLEXURE OP0237	TERMINAL ILEUM OP0246	TRANSVERSE OP0254
GASTRIC BODY OP0363	O. G. JUNCTION OP0364	DUODENUM OP0365	DESCENDING OP0366	OESOPHAGUS OP0367
ANTRUM OP0368	LEFT COLON OP0369	POLYP OP0487	ASCENDING COLON OP0488	TRANSVERSE COLON OP0490
GASTRIC OP0492	ANTRAL OP0839	SIGMOID COLON OP0842	BIOPSY OP1142	COLAN OP1512
ANTRUM OP0035	BODY OP0042	CAECUM OP0049	DESCENDING OP0085	DUODENUM OP0096
OESOPHAGUS OP0183	RECTUM OP0199	SIGMOID OP0230	SPLENIC FLEXURE OP0236	TRANSVERSE OP0253
ASCENDING OP0275	RIGHT COLON OP0461	LEFT COLON OP0462	RANDOM OP0463	HEPATIC FLEXURE OP0514
FUNDUS OP0519	ANUS OP0520	COLON OP0634	GIARDIA OP0698	DISACCH OP0699

All codes are supplied as a roll of 500 labels

Pharmaceutical and Medical Labels

PHARMACY

M0284 500/ROLL

PHARMACIST

M0555 500/ROLL

SECTION 29
COMPLETE ATTACHED
PAPERWORK

M0348 500/ROLL

NEW PRESCRIPTION
NEEDED. PLEASE
CONSULT YOUR DOCTOR

M0222 500/ROLL

THIS IS THE SAME MEDICATION YOU
HAVE BEEN GETTING, COLOUR, SIZE
OR SHAPE MAY APPEAR DIFFERENT

M0513 500/ROLL

**SHAKE WELL
BEFORE USE**

M0311 500/ROLL

SECTION 29 MEDICINE
This product is unlicensed in NZ.
Patient consents is required.

JG0477 500/ROLL

SECTION 29 MEDICINE
Record Doctor and Patient
names in register.

JG0478 500/BOX

**LIGHT
SENSITIVE
PRODUCT**

JG0504 1000/BOX

REFRIGERATE

JM0332 1000/BOX

BROKEN PACK

JM0203 1000/BOX

**USE FIRST
SHORT DATED
STOCK**

JM0286 500/BOX

**STORE IN THE
FREEZER**

JG0235 250/BOX

**TAKE
WITH
FOOD**

JG0366 500/BOX

**Swallow Whole
Do Not Crush or Chew**

JM0291 1000/BOX

**SHORT DATED
STOCK**

JG0560 500/BOX

CAUTION
Not to be taken

M0409 500/ROLL

DISPENSED BY	CHECKED BY
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JM0367 500/BOX

USE FIRST

JG0087 500/BOX

**USE REGULARLY
RINSE MOUTH
AFTER USE**

JM0319 1000/BOX

SHAKE THE BOTTLE

M0411 500/ROLL

CYTOTOXIC
Handle with Care

JG0428 500/BOX

CYTOTOXIC

M0428 500/ROLL

**CAUTION
CYTOTOXIC
DRUG**

JG0045 250/BOX

**CAUTION
CYTOTOXIC**

JG0575 500/BOX

**HANDLE WITH CARE
CYTOTOXIC
DRUG**

JG0168 500/BOX

**Keep in Fridge
Do Not Freeze**

JG0293 500/BOX

SECTION 29 MEDICINE

This product is unlicensed in NZ.
Patient & Doctor consent
is required.
Patient & Doctor names
are required by Pharmacy

JG0236 500/BOX

CYTOTOXIC CYTOTOXIC

JG0067 500/BOX

**FOR INTRAVENOUS USE ONLY
FATAL IF ADMINISTERED BY
OTHER ROUTES**

JG1148 500/BOX

CAUTION
Product is NOT STERILE
if packaging is open,
damaged, or wet.
Please check before using.

JG0021 250/BOX

**This product is
SENSITIVE to LIGHT
Keep in ORIGINAL packaging**

JG0390 500/BOX

**CONTROLLED DRUG -
PLEASE STORE IN
CONTROLLED DRUG SAFE**

JG0298 500/BOX

**TAKE WITH
OR AFTER FOOD**

M0266 500/ROLL

PHARMACIST

JM0283 1000/BOX

**SWALLOW WHOLE
DO NOT CRUSH OR CHEW**

JM0328 500/BOX

**TAKE WITH FOOD
OR AFTER FOOD**

JM0329 500/BOX

**This medicine should be given
to the patient at discharge.**

JG0570 500/BOX

PROTECT FROM LIGHT

JM0362 500/BOX

Pharmaceutical and Medical Labels

**CAUTION
CYTOTOXIC DRUG**

JG0170

500/BOX

THIS MEDICATION MAY NOT
WORK AS INTENDED IF TAKEN
WITH SOME OTHER MEDICINES
ASK YOUR PHARMACIST

JG0714

500/BOX

**RESTRICTED
DRUG**

M0470

500/BOX

This medicine may not work
as intended if taken with
some other medicines. Ask
your pharmacist.

M0545

500/ROLL

**REFRIGERATED
PRODUCT.**

Please refrigerate on
arrival

JM0186

500/BOX

**PLEASE REFRIGERATE
ON ARRIVAL
DO NOT FREEZE**

JG0450

500/BOX

**PROTECT
FROM LIGHT**

M0323

500/ROLL

THIS IS ONE OF
SEVERAL CONTAINERS
OF THE SAME MEDICINE

M0500

500/ROLL

HYPERSENSITIVE TO:

**PLEASE REFRIGERATE
DO NOT FREEZE**

JG0449

500/BOX

**PLEASE REFRIGERATE
ON ARRIVAL**

JG0022

500/ROLL

STORE IN A CONTROLLED DRUG CUPBOARD

JG0367

500/BOX

**STORE AT ROOM
TEMPERATURE
DO NOT REFRIGERATE**

JG0615

500/BOX

SECTION 29 MEDICINE
Patient & Doctor names are
required by Pharmacy

JG0668

250/BOX

**CAUTION NOT
TO BE TAKEN**

JG0433

250/BOX

**NOT TO BE
TAKEN**

M0069

500/ROLL

CONTROLLED DRUG ()
Keep in locked security cabinet
Enter in register

JG0402

500/BOX

**PLEASE
REFRIGERATE IMMEDIATELY
ON ARRIVAL**

JG0313

500/BOX

**REMOVE CONTENTS &
REFRIGERATE IMMEDIATELY
ON ARRIVAL**

JG2058

500/BOX

**DO NOT
REFRIGERATE**

JM0146

500/BOX

THESE LABELS ARE AVAILABLE IN
DIFFERENT COLOURS AND WITH
YOUR PHARMACY NAME AND
LOGO ON THEM

3 Part Printer (Available in Thermal and Matt Material)

750/ROLL

BOX - Supplied with labels in a cardboard dispenser box. • ROLL - Supplied as labels on a roll only (Dispensers can be ordered separately).

DISCARD

JG0436

100/BOX

DO NOT DISCARD

JG0437

100/BOX

BIOLOGICAL HAZARD

JG0217

500/BOX

STERILE

JG0211

500/BOX

HANDLE WITH CARE HAZARDOUS DRUG

JG0299

250/BOX

STERILE

JG0180

500/BOX

FRESH SPECIMEN

JG0102

500/BOX

POISON
10% NEUTRAL BUFFERED FORMALIN HISTOPATHOLOGY

JG0289

500/BOX

DECONTAMINATED

JG0118

250/BOX

10% FORMALIN
CAUTION CONTAINS FORMALDEHYDE TOXIC BY INHALATION AND IF SWALLOWED. IRRITATING TO THE EYES, RESPIRATORY SYSTEM AND SKIN. MAY CAUSE SENSITIZATION BY INHALATION OR SKIN CONTACT. RISK OR SERIOUS DAMAGE TO EYES. MAY CAUSE CANCER. REPEATED OR PROLONGED EXPOSURE INCREASES THE RISK.

JG0488

1000/BOX

DATE _____
TIME _____
SIGNED _____
I.V. SET UP

JG0271

250/BOX



JM0266 250/BOX

SOCIAL WORKER

JM0193 500/BOX



JM0192 500/BOX



JG0393 500/BOX



JM0227 250/BOX

PATIENT'S NAME:
BOTTLE NUMBER:..... DATE:.....
DUE UP AT:..... DUE THRO:.....
ADDITIVES:.....
.....
.....
SIGNATURE:.....

JG0053

250/BOX

SOCIAL WORKER

JM0101

500/BOX

ALERT

JG0306

500/BOX

SPINAL MORPHINE

JG0431

500/BOX

MEDICATION ADDED

JG0081

500/BOX

REPLACEMENT FLUIDS REPLACEMENT FLUIDS

JG0189

500/BOX

SENSITIVITY ALERT

JG0493

250/BOX

EMERGENCY INSERTION REPLACE WITHIN 24 HRS

JG0216RR

500/BOX

Jumbo Medical Labels

BISHOP SCORE

Date		Time	
Score	0	1	2
Position	Post	Mid	Ant
Consistency	Firm	Int	Soft
Length	3	2-1	<1
Dilatation	0	1-2	3
Station	-3	-2 -1	0
Total			
Cervidil	Given	Not Given	
Signature			

JG0583

500/ROLL

COMMUNITY MENTAL HEALTH

JM0260

500/BOX

**ARTERIAL LINE
DO NOT INJECT**

JG0487

250/BOX

**TEMPORARILY
OUT OF STOCK**

JM0258 (REMOVABLE ADHESIVE) 500/BOX

**RETURN TO
PATIENT**

JG0124

250/BOX

DRUG REACTION

NAME OF DRUG

JG0028

250/ROLL

PATIENT ON INSULIN

See supplementary insulin chart

JG2044

500/BOX

ALLERGY

JG0001

500/ROLL

**PATIENT HAS OWN
MEDICATION**

JG0119

250/BOX

MEDICAL

JM0173

1000/BOX

**PAIN MANAGEMENT
SERVICES**

JG0552

500/ROLL

**NERVE
BLOCK**

JG0542

500/ROLL

EPIDURAL

JG0005

500/ROLL

REGIONAL CATHETER

JG0007

500/ROLL

EPIDURAL

JG0826

500/ROLL

ARTERIAL

JG0143

500/ROLL

VENOUS

JG0144

500/ROLL

P.C.A.

JG0048

500/ROLL

**DOUBLE
STRENGTH**

JG0147

500/ROLL

Surname: _____

Given Name: _____

NHI: _____ DOB: _____

Sign: _____ Date/Time: _____

Always label at the Bed-side

JG489

JG0489

(PERFORATED BETWEEN LABELS)

250/ROLL

BABY:

DATE EXPRESSED: / /

TIME EXPRESSED: AM/PM

DATE DEFROSTED: / /

TIME DEFROSTED: AM/PM

JG0166

500/ROLL

**DO NOT
DISCARD**

JG0042

250/BOX

**No Known
Allergy**

JG0300

(GOLD)

250/BOX

P.C.A

P.C.A

JG0073

500/BOX

**DRUG
REACTION**

JG0092

250/BOX

E.B.M.

NAME: _____

DATE: / /

TIME: _____

JG0126

250/BOX

Jumbo Medical Labels



JG0037 500/BOX



JG0067 500/BOX



JG0068 500/BOX



JG0069 500/BOX



JG0070 500/BOX

ATRACURIUM

_____ mg in _____ ml

Date/Time _____

Added/Checked by _____

JR06 500/ROLL

CISATRACURIUM

_____ mg in _____ ml

Date/Time _____

Added/Checked by _____

JRHK12D 500/ROLL

FENTANYL

_____ mg in _____ ml NS

Date/Time _____

Added/Checked by _____

JR17 500/ROLL

MORPHINE

_____ mg in _____ ml NS

Date/Time _____

Added/Checked by _____

JR18 500/ROLL

PETHIDINE

_____ mg in _____ ml

Date/Time _____

Added/Checked by _____

JR20 500/ROLL

MIDAZOLAM

_____ mg in _____ NS

Date/Time _____

Added/Checked by _____

JR25 500/ROLL

ADRENALINE

_____ mg in _____ ml NS

Date/Time _____

Added/Checked by _____

JR34 500/ROLL

NOR-ADRENALINE

_____ mg in _____ ml NS

Date/Time _____

Added/Checked by _____

JR35 500/ROLL

DOPAMINE

_____ mg in _____ D5

Date/Time _____

Added/Checked by _____

JR37 500/ROLL

DOBUTAMINE

_____ mg in _____ ml NS

Date/Time _____

Added/Checked by _____

JR38 500/ROLL

PHENYLEPHRINE

_____ mg in _____ ml

Date/Time _____

Added/Checked by _____

JR39B 500/ROLL

NITROGLYCERIN

_____ mg in _____ ml D5W

Date/Time _____

Added/Checked by _____

JR41 500/ROLL

AMIODARONE

_____ mg in _____ ml D5W

Date/Time _____

Added/Checked by _____

JR48 500/ROLL

ACTRAPID INSULIN

_____ U in _____ ml Gelofusine

Date/Time _____

Added/Checked by _____

JR60 500/ROLL

HEPARIN

_____ U in _____ ml NS

Date/Time _____

Added/Checked by _____

JR61 500/ROLL

KCl

_____ mmol in _____ ml

Date/Time _____

Added/Checked by _____

JR65 500/ROLL

_____ mg in _____ ml _____

at _____ /

JG0013 500/ROLL

PROPOFOL

_____ mg in _____ ml

Date/Time _____

Added/Checked by _____

JRHK03 500/ROLL

Jumbo Medical Labels

**MORPHINE
MIDAZOLAM**

JG0140 500/ROLL

INSULIN

JG0142 500/ROLL

PROTAMINE

JG0521 500/ROLL

ADRENALINE

JG0133 500/ROLL

MILRINONE

JG0198 500/ROLL

NORADRENALINE

JG0134 500/ROLL

DOPAMINE

JG0135 500/ROLL

DOBUTAMINE

JG0136 500/ROLL

PHENYLEPHRINE

JG0520 500/ROLL

VASOPRESSIN

JG0199 500/ROLL

NIPRIDE

JG0137 500/ROLL

TRIDIL

JG0138 500/ROLL

GTN

JG0515 500/ROLL

MORPHINE

JG0139 500/ROLL

ARTERIAL ARTERIAL

JG0114 500/BOX

C.V.P. C.V.P.

JG0115 500/BOX

ARTERIAL

JG0161 500/BOX

**HAZARDOUS
SUBSTANCE**

JG0336 250/BOX

C.V.P.

JG0162 500/BOX

**HAZARD
ALERT**

JG0016 500/ROLL

IV CANNULATION

Date: _____ Time: _____

Inserted by: _____

Attempts: _____ Gauge: _____

Insertion Site: _____

Dressing: _____

Reason: _____

JG0157 100/BOX

MEDICINE ADDED

MEDICINE
AMOUNT
ADDED BY
DATE

TIME

JG0054 500/BOX

ALLERGY

JG0247 1000/BOX

TUBINGS CHANGE DUE :

DATE: / /

JG0036 500/BOX

MEDICATION ADDED

DRUG
AMOUNT
ADDED BY
DATE

Time

THIS LABEL MUST BE AFFIXED TO ALL INFUSION
FLUIDS CONTAINING ADDITIONAL MEDICATION.

JG0027 500/BOX

**MEDICATION
ADDED**

Name
Pt Number
Drug/Dose

Added by
Date Time

JG0280

MEDICATION ADDED

Name NHI
Drug
Amount
Added by Checked
Date Time

JG0365 500/BOX

Jumbo Medical Labels

INTRATHECAL MORPHINE

DATE: _____ TIME: _____

ADMINISTERED BY: _____

MONITORING REQUIRED FOR 24 HOURS

JG0619

500/BOX

LATEX ALLERGY

JG0125

500/BOX

LATEX PRECAUTION

JG0148

500/BOX

HEPARIN

_____ U in _____ ml NS

Date/Time _____

Added/Checked by _____

JRHW61

250/BOX

ALLERGY

DRUG: _____

JG0564

500/ROLL

EPIDURAL EPIDURAL

JG0485

500/BOX

EPIDURAL

JG0026

500/ROLL

ALLERGIC TO

JG0080

100/BOX

URGENT

JM0004

500/BOX

THROAT PACK

JG0034

500/ROLL

DENTURES

JG0225

250/BOX

BSS 500mls

Medication Added
Heparin 0.8mls 800 units
Adrenaline 1 in 1000 0.25mls

JG0812

500/BOX

**PLEASE NOTE
CHANGE
OF APPOINTMENT** 

JM0085

250/BOX

PLEASE RETURN TO
THEATRE

JG0018

500/ROLL

FRAGILE

JM0218

500/BOX

ALLERGY

JG0353

500/BOX

MEDICATION ADDED

JG0164

250/BOX

ALLERGY

DRUG: _____

REACTION: _____

JG0078

500/BOX

ALERT DOSAGE

JG0088

250/BOX

LINE COMMENCED :

DATE: / /

JG0323

250/BOX

HEPARIN/GENTAMICIN LOCK

Heparin 5,000u/ml)
Gentamicin 5mg) in _____ mls
Date/Time _____
Added/Checked by _____

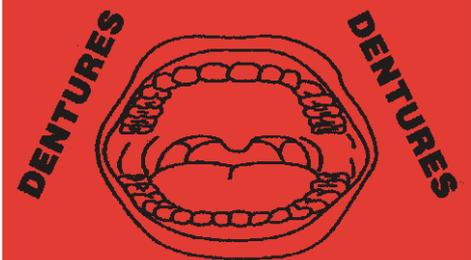
JG1195

250/BOX

Body
part/tissue
to be returned
to patient

JM0719

250/BOX



JG0096

500/BOX

INFECTION CONTROL

JG0121

500/BOX

**WARNING
ARTERIAL LINE
DO NOT INJECT**

JG0154

500/BOX

**OBSTETRIC
NOTES**

JG0075

500/BOX

IRRIGATION FLUIDS

JG0091

1000/ROLL

**WOUND
CATHETER**

JG0813

500/BOX

**CAUTION
DUPLICATE NAME**

JG0113

500/BOX

EPIDURAL EPIDURAL

JG0311

500/BOX

NAME OF SET:

DATE OF OPERATION:

SURGEON:

PATIENT NAME:

PACKED BY:

NUMBER OF CRATES:



JM0257

500/BOX

**infectious
diseases
ALERT**

JG0122

250/BOX

ACC

JM0655

500/BOX

L.A.

L.A.

JG0407

500/BOX

**For Intravenous Use Only -
Fatal if given by other routes**

JG0807

500/BOX

**10% FORMALIN
TOXIC, ECOTOXIC**

JG0739

500/BOX

M.D.R.O

JG0757

500/BOX

DENTURES

JG0223

250/BOX

**E.S.B.L.
ALERT**

JG0729

500/BOX



JM0300

500/BOX

Intrathecal Morphine

This patient has received Intrathecal (spinal) Morphine O. _____ mg for pain control. Please monitor vital signs, especially sedation and respiratory care for 24 hours as per laminated "Intrathecal Morphine management sheet"
Date _____ Time of administration _____ hrs

JG0439 500/BOX

CHECK PATIENT DETAILS

There is Another Patient with Similar or Same Name

JM0237 250/BOX

SPECIAL NOTE

THERE IS ANOTHER PATIENT WITH THE SAME OR SIMILAR NAME
CHECK!

JM0527 500/BOX

DRUG ALLERGY

JG0074 500/BOX

INFECTION PRECAUTIONS

JG0406 500/BOX

STARTED

Date: _____ Time: _____

JG2106 500/BOX

INSERTION DATE _____

INSERTED BY _____

JG0020 250/BOX

ADDITIVE LABEL

Patient Name: _____

Fluid: _____ Unit No.: _____

Drug Added: _____ Dose: _____

Date and Time Prepared: _____

Prepared by: _____ Checked by: _____

JG0270 250/BOX

Rh neg MOTHER

CORD BLOOD TAKEN YES NO

MOTHERS BLOOD TAKEN YES NO

ANTI D GIVEN YES NO

JG0041 250/BOX

INSERTION DATE _____
INSERTION TIME _____
INSERTED BY _____

JG0031 250/BOX

ORAL DRUGS

JG0035 500/BOX

P+NAME
DILUTANT
DRUG AMOUNT
PREPARED DATE TIME
PREPARED BY
CHECKED BY

JG0064 500/BOX

PERIPHERAL IV CATHETER

Insertion Site:

Catheter Gauge:

Date: Time:

Inserted by:

Date removed:

JG0110 250/BOX

DATE INSERTED _____

REPLACEMENT DATE _____

JG0019 250/ROLL

CRUSHED MEDICATION
Dr sign _____

JG0783 500/BOX

SPECIMEN TO BE RETURNED TO PATIENT

PATHOLOGIST	SENT
-------------	------

JG0317 500/BOX

POLYP _____

JG0268 500/BOX

MAINTENANCE

JG0146 500/ROLL

Jumbo Medical Labels

INSERTED BY _____
 DATE OF INSERTION _____
 REPLACEMENT DATE _____

JG0188 250/BOX

**ALERT
 NOTIFICATION**

JG0278 250/BOX

ALLERGY

JG0284 500/BOX

**OUT OF FREEZER
 DATE:
 TIME:**

JG0781 500/BOX

Amber / Screening (Please circle)
ESBL
VRE
MRSA
 State reason for screening-

JG0912 500/BOX

TISSUE TO BE RETURNED TO PATIENT

Authorised by: _____ Sent to: _____
 Sent by: _____ Date sent: _____

JG0556 500/ROLL

ACC

JM0152 500/BOX

SECURITY SEAL SECURITY SEAL SECURITY SEAL SECURITY SEAL

JG1634 250/BOX

HEP.B + VE

JG0014 500/ROLL

Discharge Checklist

Discharge Date: _____
 Speciality: _____
 Required for: _____
 Date Required: _____

Discharge summary
 Stacked
 Coding summary
 Letter typed / signed
 Coded cc3078

JG0252 (REMOVABLE ADHESIVE) 100/BOX

LINE CHANGE DUE :
 DATE: / /

JG0029 500/BOX

LINE COMMENCED :
 DATE: / /

JG0163 250/BOX

LINE CHANGED ON:
 DATE ___ / ___ / ___
 TIME _____

JG0337 500/BOX

 **I'VE BEEN CLEANED**
 DATE / /

JM0123 (REMOVABLE ADHESIVE) 500/BOX

SURNAME: _____

NHI NUMBER: _____

/24 H BAG

DATE: _____

JG0108 200/ROLL

**Spinal / Epidural
 Morphine**

JG0210 500/BOX

EPIDURAL

JHK0026 500/ROLL

**PLEASE CONFIRM THIS
 APPOINTMENT
 PH:** 

JG0046 500/BOX

HAVE YOUR PHONE NUMBER
 INCLUDED AT NO EXTRA COST

IV CANNULA

Insertion Date: / /
 Time: AM/PM Gauge:
 Print Name: _____ Sig: _____
 Removal Date: / /

JG0046 500/ROLL

IV CANNULA

Insertion Date: / / Time: AM/PM
 Gauge: _____ Site: _____
 Print Name: _____ SIG: _____
 Removal Date: / / JG490

JG0490 500/ROLL

**CAUTION
 DUPLICATE
 NAME**

JG0167 100/BOX

P.C.A.

JG0076 500/BOX

HEPARIN

JG0421

500/ROLL

PCA

JG0331

PCA

500/BOX

**CERVICAL
SCREENING**

JG0867

250/BOX

**HYPER-
SENSITIVITY**

JG0246

500/BOX

**RETURN TO
PATIENT**

JM0117

500/BOX



CORROSIVE

Contains concentrated HCl acid
Avoid contact with skin
- will burn
Do not void directly into bottle
- may result in injury!!!
If spillage/splashing occurs
wash immediately with
copious amounts of water

URINARY CATHETER INSERTION

Date _____ Inserted By _____
Batch no. _____ Expiry date _____
Site: Supra Pubic Urethral
Type: All Silicone Silicone coated
Latex Hydrogel Banano
Size of Catheter _____ FG H₂O _____ ml

JG0618

250/BOX

JG0810

500/BOX

SAFE WARMING

REMOVE BY: _____
(DATE)

ALERT

JM0210

500/BOX

SPECIAL DIET

JM0238

500/BOX

CV LINE

JG0077

500/BOX

JG0200

500/BOX

**HAVE YOU
CHECKED FOR
ANTICOAGULANT**

JG0897

500/BOX

The 5 R's
Right Patient
Right Drug
Right Dose
Right Route
Right Time

Name:
Signature:
Time & Date:
Drug Exp.:

JG0220

500/ROLL

**RETURN
BODY PARTS**

JG0441

500/BOX

**GROUP B
STREP**

JG0568

500/BOX

**RETURN TO PATIENT
BODY PARTS**

JG0599

500/BOX

Infusion / Medication

Patients Name: _____
NHI: _____
Date: _____
Time: _____

JG0908

500/BOX

**ALERT
SKIN TEAR RISK**

JG0690

500/BOX

WARMED IV FLUIDS

MUST be used within 14 days once
placed in the warmer

Expiry Date: _____

DISCARD AFTER EXPIRY DATE

JG0608

500/BOX

Hearing
Screen



PASS

JM0443

500/BOX



National Recommendation Labels

For IntraTHECAL Use Only

Patient
ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
Date Prepared by
Time Checked by

JG1166

500/BOX

For IntraTHECAL Use Only

Patient
ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
Date Prepared by
Time Checked by

JG1160

500/BOX

For EPIDURAL Use Only

Patient
ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
Date Prepared by
Time Checked by

JG1168

500/BOX

For EPIDURAL Use Only

Patient
ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
Date Prepared by
Time Checked by

JG1162

500/BOX

For REGIONAL Use Only

Type
Patient
ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
Date Prepared by
Time Checked by

JG1170

500/BOX

For REGIONAL Use Only

Type
Patient
ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
Date Prepared by
Time Checked by

JG1164

500/BOX

REGIONAL

Catheter commenced:

REGIONAL

Date/...../.....

Time

JG11785

500/BOX

IntraTHECAL

Catheter commenced:

IntraTHECAL

Date/...../.....

Time

JG11745

500/BOX

EPIDURAL

Catheter commenced:

EPIDURAL

Date/...../.....

Time

JG11765

500/BOX



National Recommendation Labels

For IntraVENOUS Use Only

Patient
 ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1167

500/BOX

For IntraVENOUS Use Only

Patient
 ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1161

500/BOX

For Subcutaneous Use Only

Patient
 ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1169

500/BOX

For Subcutaneous Use Only

Patient
 ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1163

500/BOX

ROUTE

Patient
 ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1171

500/BOX

ROUTE

Patient
 ID DOB

Medicine/s	Amount (units)	÷	Volume (mL)	=	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1165

500/BOX

Route
 Commenced:
 Date/...../.....
 Time

JG11815

500/BOX

IntraVENOUS | **IntraVENOUS**
 Commenced:
 Date/...../.....
 Time

JG11755

500/BOX

Subcutaneous | **Subcutaneous**
 Commenced:
 Date/...../.....
 Time

JG11795

500/BOX



National Recommendation Labels

For Intra-ARTERIAL Use Only

Patient
 ID DOB

Medicine/s	Amount (units)	\div	Volume (mL)	$=$	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1386

500/BOX

For Intra-ARTERIAL Use Only

Patient
 ID DOB

Medicine/s	Amount (units)	\div	Volume (mL)	$=$	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1385

500/BOX

For Enteral Use Only

Patient
 ID DOB

Medicine/s	Amount (units)	\div	Volume (mL)	$=$	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1672

500/BOX

For Inhalation Use Only

Patient
 ID DOB

Medicine/s	Amount (units)	\div	Volume (mL)	$=$	Conc (units/mL)
.....
.....
.....

Diluent
 Date Prepared by
 Time Checked by

JG1987

500/BOX

Burette Label for IntraVENOUS Use

Patient
 ID DOB

Medicine/s	Amount (units)	\div	Volume (mL)	$=$	Conc (units/mL)
.....
.....
.....

Date Prepared by
 Time Checked by

JG1172

500/BOX

Intra-ARTERIAL Intra-ARTERIAL

Commenced: Date/...../.....
 Time

JG11805

500/BOX

Enteral Enteral

Commenced: Date/...../.....
 Time

JG16735

500/BOX

CENTRAL VENOUS CENTRAL VENOUS

Commenced: Date/...../.....
 Time

JG11775

500/BOX

Sodium Chloride 0.9%

R74

500/BOX

Medicine

Conc (units/mL)

JG1173

500/BOX

Medicine Medicine

JG11825

500/BOX

Jumbo Radiology Labels



JX0009 750/ROLL



JX0202 250/BOX



JX0203 250/BOX



JX0204 250/BOX

**NUCLEAR MEDICINE
RADIO ACTIVE MATERIAL
SKELETAL / BONE**

Dose _____ MBq Time _____
Patient _____

JNM02 500/ROLL

**NUCLEAR MEDICINE
RADIO ACTIVE MATERIAL
LUNG**

Dose _____ MBq Time _____
Patient _____

JNM03 500/ROLL

**NUCLEAR MEDICINE
RADIO ACTIVE MATERIAL
RENAL**

Dose _____ MBq Time _____
Patient _____

JNM05 500/ROLL

**NUCLEAR MEDICINE
RADIO ACTIVE MATERIAL**

Dose _____ MBq Time _____
Patient _____

JNM07 500/ROLL

_____ 

ACTIVITY _____ VOL _____
DATE _____ TIME _____

JNM08/R (REMOVABLE ADHESIVE) 500/ROLL

 **RADIOACTIVE
MATERIAL**

JX0024 (REMOVABLE ADHESIVE) 500/ROLL

**DO NOT
DESTROY**

JX0025 250/ROLL

RADIOACTIVE MATERIAL

Time: _____ Tracer: _____
Activity: _____ Volume: _____
Name: _____

JNM09 500/ROLL

**CONTRAST
REACTION**

JX0028 500/ROLL

**DO NOT
DESTROY**

BEFORE _____

JX0078 250/ROLL

X-ray Contrast

Contrast: _____
Amount: _____
Prescribed by: _____
Checked by: _____
Date: _____ Time: _____

JX0166 250/BOX

**DO NOT DESTROY
FILE UNTIL**

JX0237 500/BOX

DUPLICATE

JX0037 1000/BOX

**FILM TO:
WARD / CLINIC**

JX0064 500/ROLL

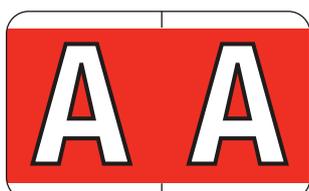
RADIOACTIVE

JX0270 250/BOX

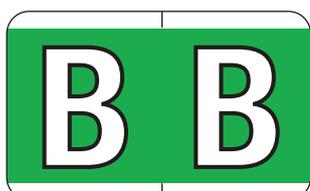


JX0077 250/BOX

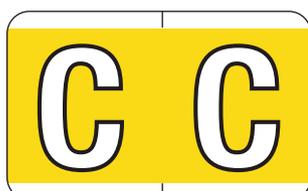
Alpha & Numerical Coding Labels



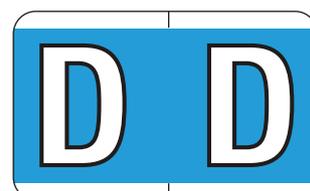
TSAAS 40/SHEET



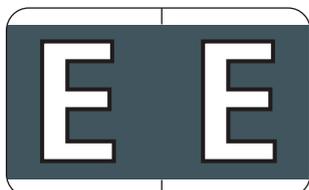
TSBBS 40/SHEET



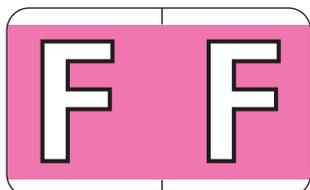
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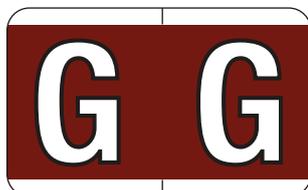
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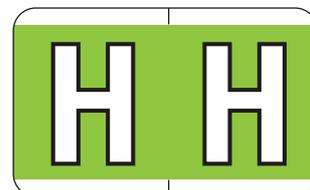
TSEES 40/SHEET



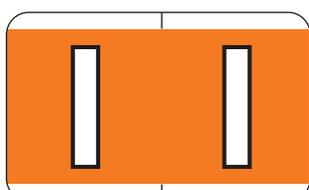
TSFFS 40/SHEET



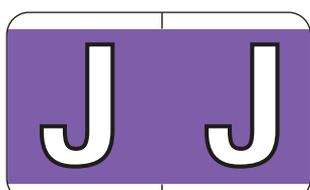
TSGGS 40/SHEET



TSHHS 40/SHEET



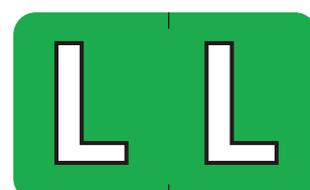
TSIIS 40/SHEET



TSJJS 40/SHEET



TSKKS 40/SHEET



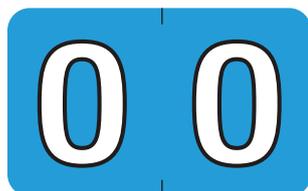
TSLLS 40/SHEET



TSMMS 40/SHEET



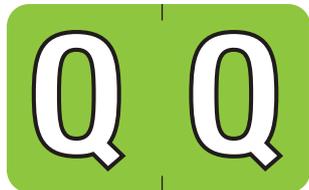
TSNNS 40/SHEET



TSOOS 40/SHEET



TSPPS 40/SHEET



TSQQS 40/SHEET



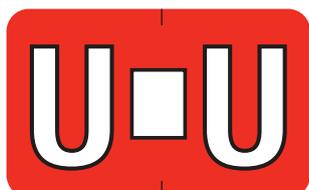
TSRRS 40/SHEET



TSSSS 40/SHEET



TS TT S 40/SHEET



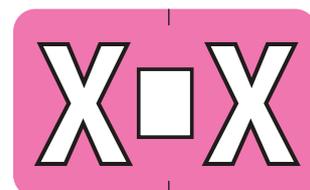
TSUUS 40/SHEET



TSVVS 40/SHEET



TSWWS 40/SHEET



TSXXS 40/SHEET



TSYYS 40/SHEET



TSZZS 40/SHEET



TY22 500/ROLL



TY23 500/ROLL

TY LABELS - 40mm x 19mm, FIT THE TLD25 LABEL DISPENSER.
CN LABELS - 32mm x 12mm, FIT THE TLD15 LABEL DISPENSER.



CN00 500/ROLL



CN01 500/ROLL



CN02 500/ROLL



CN03 500/ROLL



CN04 500/ROLL



CN05 500/ROLL



CN06 500/ROLL



CN07 500/ROLL



CN08 500/ROLL



CN09 500/ROLL



Numerical Coding Labels



TL00 500/ROLL



TL11 500/ROLL



TL22 500/ROLL



TL33 500/ROLL



TL44 500/ROLL



TL55 500/ROLL



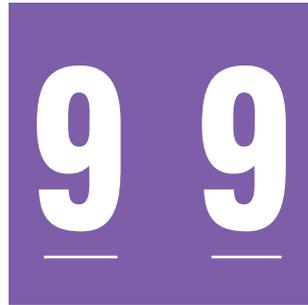
TL66 500/ROLL



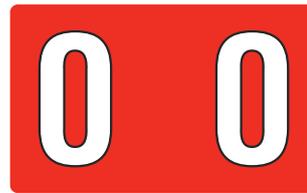
TL77 500/ROLL



TL88 500/ROLL



TL99 500/ROLL



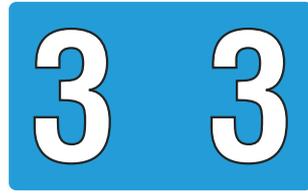
TS00 500/ROLL



TS11 500/ROLL



TS22 500/ROLL



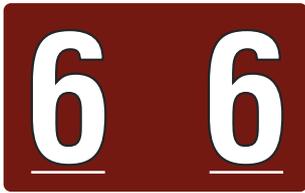
TS33 500/ROLL



TS44 500/ROLL



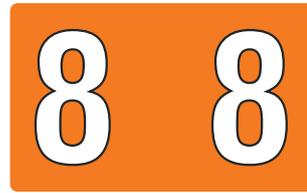
TS55 500/ROLL



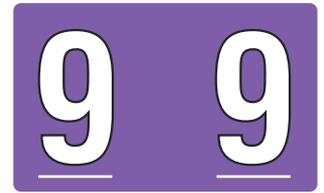
TS66 500/ROLL



TS77 500/ROLL



TS88 500/ROLL



TS99 500/ROLL



JXB0 500/ROLL



JXB1 500/ROLL



JXB2 500/ROLL



JXB3 500/ROLL



JXB4 500/ROLL



JXB5 500/ROLL



JXB6 500/ROLL



JXB7 500/ROLL



JXB8 500/ROLL



JXB9 500/ROLL

TL LABELS - 40mm x 40mm, GLOSS PAPER.
FIT THE TLD45 LABEL DISPENSER.

TS LABELS - 40MM X 25MM, LAMINATED &
CENTRE CREASED.
FIT THE TLD35 LABEL DISPENSER.

JXB LABELS - 20MM X 20MM, RADIANT RED.
FIT THE TLD25 LABEL DISPENSER.

TRIARC Specialises in Custom Printed Labels

We can design and make ANY kind of label to suit your particular requirements.

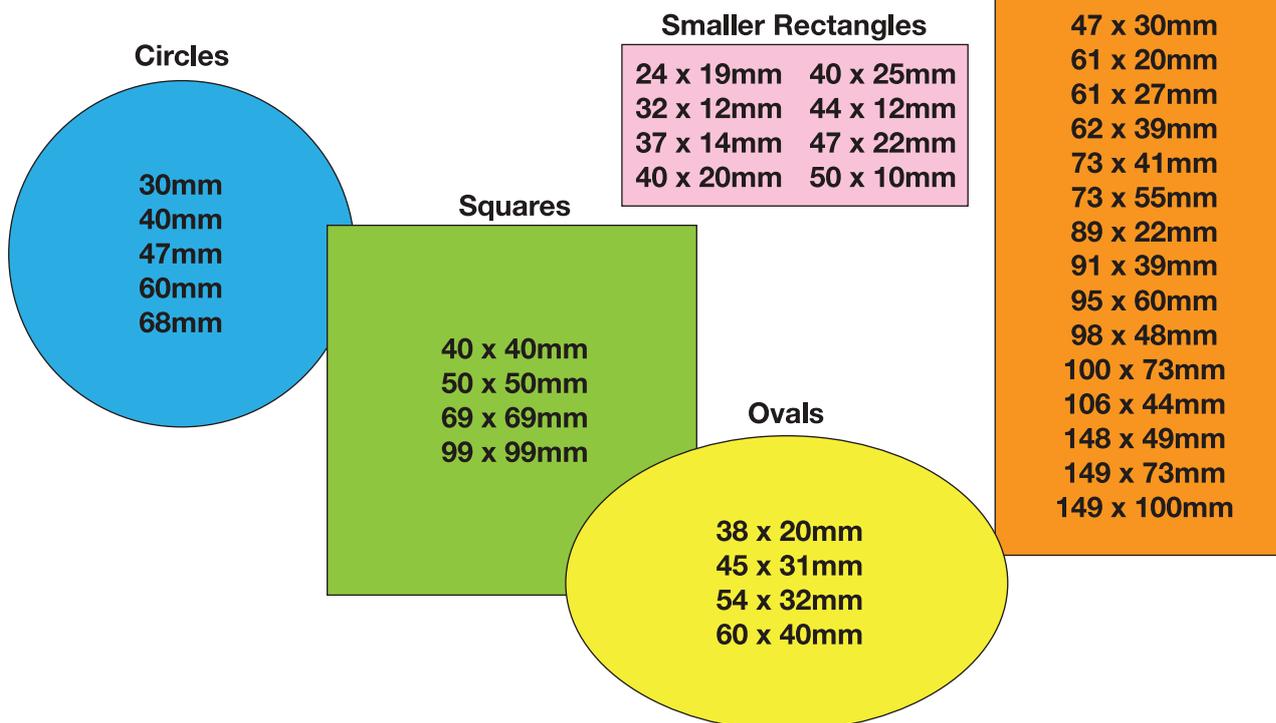
With our digital printing machines we can print any shape, size, colour or quantity at very cost effective prices.

PHONE OR EMAIL YOUR REQUEST NOW FOR A QUOTE

PLEASE ADVISE US THE SIZE, TEXT COLOUR, BACKGROUND COLOUR AND QUANTITY.

We have over 1,000 cutting dies in many shapes and sizes.

Following are some of our standard sizes that we are regularly printing, but this is just a small selection of the sizes we have available.



We can print onto a variety of materials such as Matt or Gloss Paper, Radiants / Fluoro's, Vinyls, Polypropylene, Polyester and other synthetic materials.

Did you know that we can also do the following?

- Waterproof Labels
- Clear / Transparent Labels
- Barcoding
- Sequential Numbering
- Asset / Serial Coding
- Laminating

The above are excellent for labelling equipment where a durable label is needed which can withstand getting cleaned down regularly and is long lasting. You can also track your equipment by having a barcode or QR code on it.

- Thermal Transfer Ribbons
- Magnets
- Tags

PLEASE CONTACT US FOR FURTHER INFORMATION ON THE ABOVE