

OMNISCAN Injection Packaging

	Description	Product Code	Unit	NDC
+PLUSPAK™ Polymer Bottle	100 mL PBP	J-800	Box of 10	0407-0690-70
Prefill Plus™ Needle-Free System	15 mL prefilled syringe, 5 mL saline flush syringe	J-640	Box of 10	0407-0690-62
	20 mL prefilled syringe, 5 mL saline flush syringe	J-650	Box of 10	0407-0690-63
Prefilled Syringes	10 mL	J-160	Box of 10	0407-0690-12
	15 mL	J-170	Box of 10	0407-0690-17
	20 mL	J-180	Box of 10	0407-0690-22
Glass Vials	5 mL	J-068	Box of 10	0407-0690-05
	10 mL	J-100	Box of 10	0407-0690-10
	15 mL	J-120	Box of 10	0407-0690-15
	20 mL	J-140	Box of 10	0407-0690-20
	50 mL	J-500	Box of 10	0407-0690-55

Place your order and get pricing information by calling
Customer Service at 800 292 8514, 8:00AM to 7:30PM.

Account No. _____

OMNISCAN™
(GADODIAMIDE) INJECTION



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