LIONHEART MEDICAL EXPRESS

STAT & URGENT DELIVERY REQUEST

When every minute matters, we're ready to move.

Please complete the information below so our dispatch team can quickly assess your request and coordinate the appropriate transportation service.

REQUEST INFORMATION

Requesting Facility / Company:_____

Requestor Name:_____

Phone Number:_____

Email:_____

PICKUP INFORMATION

Pickup Facility:_____

Pickup Address:_____

_____

Authorized Pickup Contact:

Pickup Phone:_____

Requested Pickup Time:_____

DELIVERY INFORMATION

Delivery Facility:_____

Delivery Address:_____

_____

Receiving Contact:_____

Receiving Phone:_____

Required Delivery Time:_____

DELIVERY PRIORITY

- ☐ STAT — Immediate Priority
- ☐ Urgent — Expedited
- ☐ Same-Day
- ☐ After-Hours
- ☐ Weekend / Holiday

CARGO INFORMATION

Type of Medical Cargo:

Number of Packages / Containers:

Approximate Weight:

Special Handling Instructions:

ADDITIONAL REQUIREMENTS

- ☐ Dedicated Driver
- ☐ Dedicated Vehicle
- ☐ Direct / No Additional Stops
- ☐ Temperature-Controlled Transportation
- ☐ Multiple Stops
- ☐ Return Trip Required
- ☐ Other: _____

IMPORTANT DELIVERY INFORMATION

Special Instructions / Time Constraints:

Required Chain-of-Custody / Documentation:

SERVICE CONFIRMATION

By submitting this request, you acknowledge that the delivery is subject to driver availability, route requirements, applicable service conditions, and confirmation by LionHeart Medical Express.

REQUEST YOUR STAT SERVICE

Phone: _____ Email: _____ Website: _____

LIONHEART MEDICAL EXPRESS

Beyond the Ordinary. Driven by Compassion. Dedicated to Care.

Rapid Response • Reliable Transportation • Professional Care