

# HISTOPATHOLOGY REQUISITION FORM

Name of Patient Jay Bahadur Chetry Date of Birth/ Age 70 Yr Sex: Male / Female ☒  
 Client Code SPL/AS/056 Date & Time of Sample collection 5/6/23  
 Telephone \_\_\_\_\_ Referring Doctor (Name & Tel No.) DR. A. Hazarika  
9632636747

Site of Specimen:

Relevant Clinical History:

Additional Clinical and Relevant Data:

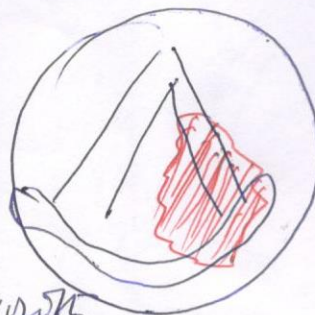
(Previous Biopsy / FNAC/ X-ray etc.):

H/o. change of voice

Occasyn - large @

vocal cord growths.

biopsy taken from growth for HPE.



Clinical Diagnosis:

Type of Specimen

Imp. Carcinoma larynx.

☐ Large ☐ Medium ☐ Small  
☐ IHC markers ☐ Special Stains

24281344

Histopath Slides / Block for review

No. of slides \_\_\_\_\_

No. of Blocks \_\_\_\_\_

Fixation

☐ Adequate

☐ Inadequate

## INSTRUCTION FOR FILLING UP FORM:

1. Please tick appropriate boxes only ☒
2. Please furnish complete clinical detail along with Request form.
3. Samples details not covered above should be entered in miscellaneous box.
4. Do not omit telephone number of Patient / Referring Doctor.
5. Guidelines for Creating Formalin - All the samples should be in 10% formalin ( can be made by mixing 1 part formalin(40% formaldehyde solution) with 9 part distilled water.
6. Volume of fixative should be atleast 10 times the volume of tissue.