

Lab No: **Dr Lal Path Labs Ltd**

National Reference Laboratory: Sector 18, Block E, Rohini, New Delhi 110 085
 Tel: 91-11- 3040 3210, 3988 5050. Fax: 91-11-3040 3204
 E-mail: lalpathlabs@lalpathlabs.com Website: www.lalpathlabs.com

Please send to:

Department of Histopathology
 National Reference Laboratory
 Dr. Lal Path Labs Ltd, Block E,
 Sector 18, Rohini, Delhi 110085

Telephone: +91-11-30244139 Extension 343
 Fax: +91-11-27882134,
 website: www.lalpathlabs.com
 Email: Histopath.lpl@lalpathlabs.com

HISTOPATHOLOGY REQUISITION FORMCorporate Referring Doctor Dr. Ambati KaDate 21/5/24Name Pramila SahuDate of Birth 40ySex: Male / Female ☒Telephone 865269860Collection Centre DnkwdRCC
(if different)

Site of Specimen:

Relevant Clinical History:

Additional Clinical and Relevant Data:

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

Histopath for
 uterus & cervix
 C B/L Tube

Type of Specimen:
☐ Large ☒ Medium ☐ Small
☐ Miscellaneous☐ IHC markers☐ Special Stains☐ Microphotography**Histopath Slides / Block for review:****Fixation**☐ Adequate☐ Inadequate**INSTRUCTIONS FOR FILLING UP FORM:**

1. Please tick appropriate boxes only as ✓
2. Please furnish complete clinical details 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. Immerse specimen completely in appropriate fixative (10% formalin / others) before dispatch.
6. Rs. 200/- extra charges for microphotography requests.