

Lab No: **Dr Lal PathLabs Ltd**A 066 1318

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](mailto:lalpathlabs@lalpathlabs.com) Website: [www.lalpathlabs.com](http://www.lalpathlabs.com)**Please send to:**

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

Telephone: +91-11-30244139 Extension 343  
 Fax: +91-11-27882134,  
 website: [www.lalpathlabs.com](http://www.lalpathlabs.com)  
 Email: [Histopath.lpl@lalpathlabs.com](mailto:Histopath.lpl@lalpathlabs.com)

**HISTOPATHOLOGY REQUISITION FORM**Corporate \_\_\_\_\_ Referring Doctor Dr. manjusha Date 17/5/24Name Dasoni Sahy Date of Birth \_\_\_\_\_ Sex: Male / Female \_\_\_\_\_Telephone 7999439704 Collection Centre \_\_\_\_\_ RCC \_\_\_\_\_  
(if different)

## Site of Specimen:

Relevant Clinical History: uterus cervical Bilateral fallopian tube ovary

## Additional Clinical and Relevant Data:

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

## 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.