TEST REQUISITION FORM (TRF)

NABL MC-3555

SagePath® Excellence In Health Care

Patient Details (PLEAE FILL IN CAPITAL LETTERS ONLY) :

Name : Mr Anjumkumar Barvekar

Age : 40 Yrs : ___ Months ___ Days

Sex : Male ☑ Female ☐ Date of Birth : ☐☐ ☐☐ ☐☐☐☐

Ph : ___

Client Details :

SPP Code SPL-NP. 221

Customer Name Shubh path Bhandara

Customer Contact No 9960861542

Ref Doctor Name Dr. Gopal Vyas

Ref Doctor Contact No ___

Specimen Details:

Sample Collection date : 7/7/25	Specimen Temperature :	Sent	Frozen (<-20°C) ☐	Refrigerator (2-8°C) ☐	Ambient(18-22°C) ☐
Sample Collection Time : 9.30 AM / PM		Received	Frozen (<-20°C) ☐	Refrigerator(2-8°C) ☐	Ambient (18-22°C) ☐

Test Name / Test Code	Sample Type	SPL Barcode No
Histopath:-	Histopath	A-1076569
Diagnosis:- Fistula in Ano post & Kochs		
specimen:- Fistula in ano		

Clinical History:

No. of Samples Received:

Received by:

Note: Attach duly filled respective forms viz. Maternal Screening form(for Dual, Triple & Quad markers), HIV consent form, Karyotyping History form, IHC form, HLA Typing form along with TRF.

DR.GOPAL VYAS
M.B.B.S.,D Orth.
Orthopaedic Surgeon
Regn.No.:83611
Time: 10.00 a.m. TO 7.00 p.m.

LAKSH HOSPITAL

A NAME FOR CARE, CONFIDENCE & TRUST

DR.JAYA VYAS
B.A.M.S.
Regn.No.:I-39534-A-1
Time: 10.00 a.m. TO 3.00 p.m.

Takiya Ward, Nagpur Road, Bhandara.-441 904 (M.S.) INDIA
Cell:7378900978/7741884813 e-mail:lakshhospital1@gmail.com

Arunkumar Barekar

[illegible] [illegible]

Δ fistula in Ano [illegible]

Specimen fistula for [illegible]

[illegible]

[illegible]

7/7/[illegible]