



HISTOPATHOLOGY/CYTOTOLOGY/PAP SMEAR – TEST REQUISITION FORM

Instructions for sending samples:-

1. A duly filled test requisition for (TRF) must accompany all the specimens for histopathology, cytology and Pap smear study.
2. Use adequate formalin for biopsy/histopathology samples. Give one or two cuts in case of large samples to expose the deeper part of the tissue to formalin. Delay of more than 24 hours may result in autolysis and contamination of the specimen and pre analytical rejection. Ensure minimum turnaround time from collection to sending the sample to CPL.
3. Site of tissue sampling or from where the biopsy is taken from the body must be filled. Use correct histopathology test code as per the size of the sample, in case of wrong code lab reserves the right to not process the sample or withhold the report.
4. Doctor's and patient's contact number must be filled in as more information may be needed to report the case. Unavailability information may cause delay or non-reporting of the specimen. In cases for histopathology review/second opinion a copy of the previous reports must be sent.

Patient's details: *Shital Waghe*

Name:

Age: *38*

Sex: *Female*

Barcode and source code:

Date of collection: *20/12/2025*

Length of tissue specimen in cm :
(Maximum dimension)

Site of tissue biopsy/sample : *uterine fibroid*

Clinical diagnosis : *submucosal uterine fibroid*

Relevant medical history : *Plv bleeding*

Test requested : *HPR*

Reports of other investigations :

(Like X-ray for bone biopsy or other

Tests)

Patient's contact number :

Referring doctor's name : *Dr Arpana Shah*

Referring doctor's contact number : *9822009425*