



South West London Pathology - Cellular Pathology

Level 01, Jenner Wing, St George's University Hospitals NHS Foundation Trust, London, SW17 0QT CPA Accredited

Histopathology Enquiries 0208 725 5267/9/4/3 Frozen Section Bookings 0208 725 5256/7

For lab use only: Cut by Checked	Location (for return of report):	NHS No.....
	Requesting Consultant/GP name & code:	Hospital No..... Surname.....
	Request date ___/___/____	Forename(s).....Sex M / F
	Minor Op date ___/___/____	DOB ___/___/___ Private Y / N
Patient consent for use of material in clinical research audit/ teaching? Yes <input type="checkbox"/> No <input type="checkbox"/>		High risk sticker here!
Patient on cancer pathway: Yes <input type="checkbox"/> No <input type="checkbox"/>	Clinical details, with relevant past medical history & clinical diagnosis:	
Site of specimen:		
		Contact name: (PRINT).....
		Dr's signature & bleep no.....

	Site of specimen	Process category	No of cassettes	AE	Special requirements	No of pieces	Max size of tissue
A							
B							
C							
D							
E							
F							
G							
H							