

South West London Pathology — Cellular Pathology



Level 01, Jenner Wing, St. George's University Hospitals NHS Foundation Trust, London SW17 0QT UKAS Accredited 9913

MAKING EVERY TEST MATTER

Histopathology		Enquiries 020 8725 5267/9/4/3	Frozen Section Bookings 020 8725 5256/7
For lab use only: Cut by: Checked:	Location (for return of report) Requesting consultant/GP name & code: Requesting date: __/__/____ Minor Op date: __/__/____	NHS no..... Hospital no..... Surname..... Forename(s)..... Sex M / F DOB: __ / / _____ Private Y / N	
Patient consent for use of material in clinical research audit/teaching Yes <input type="checkbox"/> No <input type="checkbox"/>			
Patient on cancer pathway Yes <input type="checkbox"/> No <input type="checkbox"/>		Clinical details with relevant past medical history and clinical diagnosis:	
Site of specimen: A:		A: Contact name (PRINT): Dr's signature and bleep no.....	
		High Risk Sticker here!	

REFER TO [SWLP-Pathology-Services-Handbook-.pdf \(swlpath.nhs.uk\)](http://swlpath.nhs.uk) FOR SAMPLE COLLECTION REQUIREMENTS

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