# )

#### McLAREN CENTRAL MICHIGAN

1221 SOUTH DRIVE, MT. PLEASANT, MI 48858

## **PATHOLOGY REQUEST**

TIENT NAME (LAST NAME FIRST)				PATIENT LABEL	
ATIENT NAME (LAST NAME FIRST)		PAT	PATHOLOGY NUMBER		
			FROZEN SECTION		
RDERING PHYSICIAN:					
SELINIO I III GIGINI.		☐ PATHOLOGY DISCRETION  O.R. ROOM#			
RTHDATE (MO/DA/YR)   AGE   MALE   FEMALE   SURGEON					
AGE   MALE   EMALE   GONGLON		DATE OF SURGERY			
CLINICAL HX / PRE-OP DIAGNOSIS				,	
SURGICAL PROCEDURE					
SOURCE OF SPECIMEN					
#1			TIME	STAFF INITIALS	
Non GYN Cytology Number:	DATE		INITIAL		
Non GYN Cytology Number:	DATE REC'D		INITIAL		
Non GYN Cytology Number:  SOURCE OF SPECIMEN					
Non GYN Cytology Number:  SOURCE OF SPECIMEN  □ FINE NEEDLE ASPIRATION		□ PERITONEAL		SPUTUM	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE:	REC'D	☐ PLEURAL L R		BRONCHIAL	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNG	REC'D	☐ PLEURAL L R ☐ URINE			
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNG BREAST CYST L R LIVE	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNG BREAST CYST L R LIVER THYROID LUMP L R THYROID CYST L R	REC'D	<ul><li>□ PLEURAL L R</li><li>□ URINE</li><li>□ BLADDER WASH</li></ul>		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNG BREAST CYST L R LIVE	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNC BREAST CYST L R LIVEI THYROID LUMP L R THYROID CYST L R	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNG BREAST CYST L R LIVER THYROID LUMP L R THYROID CYST L R	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNC BREAST CYST L R LIVEI THYROID LUMP L R THYROID CYST L R	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNC BREAST CYST L R LIVEI THYROID LUMP L R THYROID CYST L R	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNC BREAST CYST L R LIVEI THYROID LUMP L R THYROID CYST L R	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNC BREAST CYST L R LIVEI THYROID LUMP L R THYROID CYST L R	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNC BREAST CYST L R LIVEI THYROID LUMP L R THYROID CYST L R	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LIVE BREAST CYST L R LIVE THYROID LUMP L R THYROID CYST L R  NON-GYN CLINICAL HISTORY	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	
Non GYN Cytology Number:  SOURCE OF SPECIMEN  FINE NEEDLE ASPIRATION SPECIFY SITE: BREAST LUMP L R LUNC BREAST CYST L R LIVEI THYROID LUMP L R THYROID CYST L R	REC'D	☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER		BRONCHIAL □ BRUSH L R	



115B

## McLAREN CENTRAL MICHIGAN

1221 SOUTH DRIVE, MT. PLEASANT, MI 48858

## **PATHOLOGY REQUEST**

Referred Specimen, Attach Patient Demographics PATIENT NAME (LAST NAME FIRST)		PATHOLO	GY NUMBER	TIENT LABEL	
		☐ FROZE	EN SECTION		
RDERING PHYSICIAN:	□ PATHO	☐ PATHOLOGY DISCRETION			
		O.R. ROOM#			
RTHDATE (MO/DA/YR)   AGE   MALE   FEMALE   SURGEON		I	DATE OF	SURGERY	
CLINICAL HX / PRE-OP DIAGNOSIS					
SURGICAL PROCEDURE  SOURCE OF SPECIMEN #1		TIN	/E	_ STAFF INITIALS	
Non GYN Cytology Number:	DATE		INITIAL		
	REC'D				
SOURCE OF SPECIMEN					
SOURCE OF SPECIMEN    FINE NEEDLE ASPIRATION   SPECIFY SITE:   BREAST LUMP   L R   LUNG   BREAST CYST   L R   LIVER   THYROID LUMP   L R   THYROID CYST   L R   THYROID CYST   L R   LIVER   THYROID CYST   L R		☐ PERITONEAL ☐ PLEURAL L R ☐ URINE ☐ BLADDER WASH ☐ OTHER (SPECIFY):	☐ SPUTU☐ BRON☐ BR	CHIAL USH L R	



115B

## McLAREN CENTRAL MICHIGAN

1221 SOUTH DRIVE, MT. PLEASANT, MI 48858

## **PATHOLOGY REQUEST**

Referred Specimen, Attach Patient Demographics ATIENT NAME (LAST NAME FIRST)		DATUOL		ENT LABEL	
ATIENT NAME (LAST NAME FIRST)		PATHOLO	OGY NUMBER		
		□ FROZ	ZEN SECTION		
RDERING PHYSICIAN:		☐ PATHOLOGY DISCRETION  O.R. ROOM #			
RTHDATE (MO/DA/YR)   AGE   MALE   FEMALE   SURGEON		DATE OF SURGERY			
CLINICAL HX / PRE-OP DIAGNOSIS				,	
SURGICAL PROCEDURE					
SOURCE OF SPECIMEN					
#1		T	ME	STAFF INITIALS	
Non GYN Cytology Number:	DATE REC'D		INITIAL		
SOURCE OF SPECIMEN	REC D				
		☐ PERITONEAL	☐ SPUTUM	1	
		□ PLEURAL L R	☐ BRONCH		
SPECIFT SITE.		- I LLOIVAL L IX		TIAL	
□ BREAST LUMP L R □ LUNG L		☐ URINE	☐ BRU	SH L R	
☐ BREAST LUMP L R ☐ LUNG L ☐ BREAST CYST L R ☐ LIVER L		<ul><li>☐ URINE</li><li>☐ BLADDER WASH</li></ul>	☐ BRU		
☐ BREAST LUMP L R ☐ LUNG L ☐ BREAST CYST L R ☐ LIVER L ☐ THYROID LUMP L R		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
☐ BREAST LUMP L R ☐ LUNG L ☐ BREAST CYST L R ☐ LIVER L		<ul><li>☐ URINE</li><li>☐ BLADDER WASH</li></ul>	☐ BRU	SH L R	
☐ BREAST LUMP L R ☐ LUNG L ☐ BREAST CYST L R ☐ LIVER L ☐ THYROID LUMP L R		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
□ BREAST LUMP L R □ LUNG L □ BREAST CYST L R □ LIVER L □ THYROID LUMP L R □ THYROID CYST L R		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
□ BREAST LUMP L R □ LUNG L □ BREAST CYST L R □ LIVER L □ THYROID LUMP L R □ THYROID CYST L R		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
□ BREAST LUMP L R □ LUNG L □ BREAST CYST L R □ LIVER L □ THYROID LUMP L R □ THYROID CYST L R		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
□ BREAST LUMP L R □ LUNG L □ BREAST CYST L R □ LIVER L □ THYROID LUMP L R □ THYROID CYST L R		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
□ BREAST LUMP L R □ LUNG L □ BREAST CYST L R □ LIVER L □ THYROID LUMP L R □ THYROID CYST L R		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
BREAST LUMP L R LUNG L BREAST CYST L R LIVER L THYROID LUMP L R THYROID CYST L R  NON-GYN CLINICAL HISTORY		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
BREAST LUMP L R LUNG L BREAST CYST L R LIVER L THYROID LUMP L R THYROID CYST L R  NON-GYN CLINICAL HISTORY		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
BREAST LUMP L R LUNG L BREAST CYST L R LIVER L THYROID LUMP L R THYROID CYST L R  NON-GYN CLINICAL HISTORY		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
☐ BREAST LUMP L R ☐ LUNG L ☐ BREAST CYST L R ☐ LIVER L ☐ THYROID LUMP L R ☐ THYROID CYST L R  NON-GYN CLINICAL HISTORY		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	
☐ BREAST LUMP L R ☐ LUNG L ☐ BREAST CYST L R ☐ LIVER L ☐ THYROID LUMP L R ☐ THYROID CYST L R  NON-GYN CLINICAL HISTORY		<ul><li>□ URINE</li><li>□ BLADDER WASH</li><li>□ OTHER</li></ul>	☐ BRU	SH L R	



115B