

McLaren Print System Order

Order No: 86813
 Order Date: 2024-07-10
 User: Rebecca Kleeves
 Phone: 8199893360

Ship Location: McLaren Port Huron 2S Surgical Services office Attn: Becky Kleeves
 1221 Pine Grove Ave
 Port Huron, MI 48060-3568

Form
 Quantity: 6
 Paragon Dept No: 28575
 Dept Name: Surgical Services
 Company Number:

Order Total Price: 246.00

Item Number: 388
 Item Description: SURGICAL-CYTOLOGY FORM 4 PART
 Revision Date: 12/2014
 Print:
 Paper:
 Size:
 Fold:
 Finish:
 Drill:
 Poster:
 Misc Info: 100 sets per package; SS; black; 4 PART

The image shows a detailed 'Surgical/Cytology Request Form' from McLaren Port Huron. The form is divided into several sections for data entry:

- Header:** McLaren logo and address (1221 Pine Grove, Port Huron, MI 48060).
- Formal Fields:** Patient Name, Date, Time, and Patient Identification.
- Procedure/Specimen Information:** Includes 'Surgical/Cytology Request Form', 'Specimen Type', 'Container', 'Submitting Physician', and 'Specimen To'.
- Clinical History:** A section for 'CLINICAL HISTORY/DIAGNOSIS/OPERATIVE/ENDOSCOPIC FINDINGS' and 'OB/GYN CLINICAL HISTORY' with checkboxes for various conditions like 'MENOPAUSE', 'HIGH RISK/PT', 'ANUS', 'ADUS', 'TVUS', 'HBS', 'MENOPAUSE BLEEDING', 'BOP', 'ADRENAL THERAPY', 'HYPERSTROPHY', 'PMS', 'POSTMENOP', 'PROSTATE', 'ADENOMA', and 'OTHER'.
- Procedure Section:** 'PROCEDURE' with checkboxes for 'INVOIN SALIVARIANITY' (NO/YES).
- Specimen Details:** 'SURGICAL SPECIMENS (SITE)' and 'CYTOLOGY SPECIMENS (SITE)' with checkboxes for various sites like 'SPUSHINGS', 'CSP', 'CRA', 'GYN/HP', 'PERITONEAL/PELVIC', 'PLURAL', 'SPUTUM', 'URINE', 'WASHINGS', 'PNEUMOCYSTIS STAIN', and 'OTHER'. It also includes 'ADDITIONAL REQUESTS ON SURGICAL/CYTOLOGY SPECIMENS ONLY' with checkboxes for 'LIP STAIN IN BOP FUSION ONLY', 'CELL COUNT', 'HIF/LASE', 'DNA/ESTEROL', 'GLUCOSE', 'LEH', 'PROTEIN', and 'OTHER'.
- Specimen Source:** 'SPECIMEN SOURCE' with checkboxes for 'AEROBIC CULTURE + GRAM STAIN', 'AEROBIC/ANAEROBIC CULTURE', 'GRAM STAIN', 'TB CULTURE + AFB SMEAR', 'FUNGAL CULTURE', 'VIRUS COMPREHENSIVE DETECTION', and 'OTHER'.
- Stillborn Fetus:** A section for 'STILLBORN FETUS: LESS THAN 20 WEEKS OR 400 GRAMS' with checkboxes for 'EXTERNAL GROSS EXAMINATION ONLY UNLESS BOX BELOW CHECKED AND SIGNED' and 'DISSECTION/MICROSCOPIC EXAMINATION'.
- Lab Use:** 'LAB USE ONLY FOR INTRAOPERATIVE CONSULTATION'.
- Signature and Date:** Fields for 'Physician/Specimen' and 'Date, Time'.
- Barcode and Footer:** A barcode at the bottom left and a footer with 'Physician Order Lab' and 'McLaren Form 998 12/14'.

Spec Info: