

PUSHPANJALI HOSPITAL

(A Unit of Pushpanjali Medicare Pvt. Ltd.)


Rajesh Pilot Chowk, Garhi Bolni Road, Rewari-123401 (Haryana), India

Phone No +91-1274-263300, 260021

E-mail : pushpanjalihospitalrewari@gmail.com, CIN U85110DL1987PTC207727

Lab No:

HISTOPATHOLOGY REQUISITION FORM

Patient Name Satyapal Referring Doctor Dr. Manoj Yadav Date 10/07/21
Age 46 Date of Birth 46 Sex: Male / Female
OPD No. _____ Collection Centre _____ Uhid No. 116538
Phone _____  11856940 RCC _____
(if different)

Site of Specimen: Rectum polyp
Relevant Clinical History: Polypsctomy done
Additional Clinical and Relevant Data: _____
(Previous Biopsy/ FNAC/X-ray etc.) Clinical Diagnosis: _____

Size of Specimen:
 Large Medium Small
 Miscellaneous
 IHC markers
 Special Stains
 Microphotography
Fixation
 Adequate
Inadequate

Rectal polyp biopsy to R/O malignancy
Histopath Slides / Block for review:

Doctor's Signature
Manoj Yadav
Dr. Manoj Yadav
MBBS, MD (Gen Med)
Dipl Gastroenterology
Reg No. MH 170
Pushpanjali Hospital