



# PUSHPANJALI HOSPITAL



(A Unit of Pushpanjali Medicare Pvt. Ltd.)

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Lab No:

## HISTOPATHOLOGY REQUISITION FORM

Patient Name Jaya Referring Doctor Dr. Manoj Yadav Date 12/07/24  
 Name \_\_\_\_\_ Date of Birth 16 Sex: Male / Female \_\_\_\_\_  
 IPD No \_\_\_\_\_ Collection Centre \_\_\_\_\_ Uhid No. 153711 **IPD**  
 Telephone \_\_\_\_\_ RCC \_\_\_\_\_  
 (if different)

Site of Specimen: Ic valve biopsy  
 Relevant Clinical History:

Additional Clinical and Relevant Data:  
 (Previous Biopsy/ FNAC/X-ray etc.) Clinical Diagnosis: Colonoscopy: Deep ulcers  
seen over Ic valve

### Type of Specimen:

Large  Medium  Small

1) Ic valve biopsy for T.B. PCR

2) Ic valve biopsy (H.P.R.)

Histopath Slides / Block for review:

to R/O Tuberculosis / IBD

Miscellaneous



Special Stains



ography

### Fixation

Adequate

Inadequate

Doctor's Signature's

Dr. Manoj Yadav  
 MBBS MD (D. Med. Microbiol.)  
 D.M. Gastroenterology  
 Reg. No. HN 11067  
 Pushpanjali Hospital

