

PUSHPANJALI HOSPITAL



(A Unit of Pushpanjali Medicare Pvt. Ltd.)
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Lab No:

HISTOPATHOLOGY REQUISITION FORM

Patient Name Abhay Singh Referring Doctor Dr. Manoj Yadav Date 20/07/20
Age 59 Date of Birth 59 Sex: Male / Female
ID No. _____ Collection Centre _____ Uhid No. 150734
Phone _____



of Specimen: IC valve biopsy

Relevant Clinical History:

Additional Clinical and Relevant Data:
(Previous Biopsy/ FNAC/X-ray etc.) Clinical Diagnosis:

? Neocercarial dermatitis

(Ulcers + edema + erythema of)

Size of Specimen:

Large Medium Small

- Miscellaneous
- IHC markers
- Special Stains
- Microphotography

IC valve biopsy for T.B. PCR

IC valve biopsy to R/O
Histopath Slides / Block for review:

T.B / IBD

Fixation

Adequate
Inadequate

Doctor's Signature's
Dr. Manoj Yadav