

# PUSHPANJALI HOSPITAL



(A Unit of Pushpanjali Medicare Pvt. Ltd.)

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Lab No:

MISHRI DEVI

## HISTOPATHOLOGY REQUISITION FORM

Patient Name 29/07/24 Referring Doctor Dr. Manoj Yadav Date 29/07/24  
Name \_\_\_\_\_ Date of Birth 86 Sex: Male / Female   
IPD No \_\_\_\_\_ Collection Centre \_\_\_\_\_ Uhid No. 119899  
Telephone \_\_\_\_\_  11856678 RCC \_\_\_\_\_  
(if different)

Site of Specimen: Antrum

Relevant Clinical History:

Epigastric pain

Additional Clinical and Relevant Data:

(Previous Biopsy/ FNAC/X-ray etc.) Clinical Diagnosis:

Type of Specimen:

Large

Medium

Small

Miscellaneous

IHC markers

Special Stains

Microphotography

Antral biopsy to RLO of Pylorus

Histopath Slides / Block for review:

Fixation

Adequate

Inadequate

Doctor's Signature

Manoj  
Dr. Manoj  
MBBS MD (Gastroenterology)  
DM Gastroenterology  
Reg No HN 17  
Pushpanjali Hospital

