



CHUGHTAIS LAHORE LAB
DEPARTMENT OF HISTOPATHOLOGY

Histopathology Request Form

FOR CONSULTANT/DOCTOR USE

Patient Name: _____ Age/Sex: _____

History: _____

Specimen: _____

Time of Surgery/Biopsy: _____

Time put in Container: _____

Doctor Name: _____ Doctor Contact Number: _____

Signature: _____

Test Required

Histopathology	
ER/PR/Her2	
Her 2 BY FISH	

Interval between removal / resection and putting specimen in formalin must be less than 60 minutes

PLEASE CALL THE CLL HOTLINE FOR SPECIMEN COLLECTION
0345-4008417

For LAB USE

Lab number: _____ Biopsy Number: _____

Time of Gross Examination: _____

Time Before Fixation: _____

Total Fixation Time: _____

Instructions:

Please note the biopsy time

Please note time specimen was put in Formalin

Interval between removal / resection and putting specimen in Formalin must be less than 60 minutes