CBM | PATHOLOGY

CYTOLOGY, BIOPSY, MICROSCOPY
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CERVICAL/VAGINAL CYTOLOGY REQUISITION FORM

REFERRING/ORDERING M.D.:
NAME:
UPIN#:

ADDRESS:

PATIENT LAST NAME: FIRST: MI:

PATIENT SOCIAL SECURITY#: DATE OF BIRTH: ___/___/____

PATIENT'S COMPLETE ADDRESS:

(If other than patient)
NAME OF INSURED/RESPONSIBLE PARTY(*last, first, MI*):
ADDRESS OF INSURED/RESPONSIBLE PARTY:

PATIENT/RESPONSIBLE PERSON SIGNATURE:

BILL TO: ___ ACCOUNT ___PATIENT ___INSURANCE ***(fill information below or attach a copy of the patient's information sheet, <u>and</u> attach a copy of the insurance card(s), front and back)***

INSURED SOCIAL SECURITY # *(if not patient)*:

<u>PRIMARY INSURANCE</u>: Relationship to insured: __SELF __SPOUSE __DEPENDENT
INSURANCE COMPANY NAME:_____
MEMBER/INSURED ID#:_____ GROUP #:_____
INSURANCE ADDRESS:
HMO / PPO *(circle)*

<u>SECONDARY INSURANCE</u>:
INSURANCE COMPANY NAME:_____
MEMBER/INSURED ID#:_____ GROUP #:_____
INSURANCE ADDRESS:
HMO / PPO *(circle)*

COLLECTION DATE:
____/____/____

SIGNATURE OF ORDERING M.D.
(or designated person)

ICD-9 CODE(S):

SPECIMEN SOURCE: ___ CERVIX ___ VAGINAL CUFF

SPECIMEN TYPE: ___1 SLIDE ___THIN LAYER PAP

ROUTINE PAP: ___ FOLLOW-UP PAP: ___
SURGICAL BIOPSY ALSO SUBMITTED: ___
HPV (high risk): ___ Reflex HPV(high risk): ___

___NON-MEDICARE PATIENT
___MEDICARE PATIENT:
___ROUTINE PAP
___ROUTINE PAP IN HIGH RISK PATIENT (medical history)
___PAP SMEAR: HX OR SIGNS AND SYMPTOMS OF MEDICAL NECESSITY.

CLINICAL DATA:
LMP:_____ HORMONAL TREATMENT:_____

PREVIOUS MEDICAL HX:_____

SPECIAL REQUESTS:_____

PREVIOUS PAP SMEAR DATE: __/__/__ DIAGNOSIS:_____

PREVIOUS SURGICAL BIOPSY: __/__/__ DIAGNOSIS:_____

<u>CYTOLOGY LABORATORY USE ONLY</u>

Adequacy: __S qualification:_____ __Unsat due to:_____ Endocx: Y N
Diagnosis: __<u>Negative for Intraepithelial Lesion or Malignancy</u> __<u>Epithelial Cell Abnormality</u> <u>_Other</u>
Descriptive Diagnosis:

_ASC-US _ASC-H _LGSIL(CIN1/HPV)
_HGSIL(CIN2, CIN3/CIS) _OTHER
_AGUS _ADENOCA(_endocx, _endom, _met)

Comment/Recommendation:

Cytotechnologist: *Pathologist:*