Filling Out the Information on the Ocular Pathology Consultation Request Form

❖ Ocular Pathology Consultation Request forms are available through the F.C. Blodi Eye Pathology Laboratory or if you prefer you may write the patient and referring information on your own requisition.

   i. All requests for consultation must be done by the Ocular Pathology Consultation Request Form. Verbal or phone orders are not accepted.

❖ The F.C. Blodi Eye Pathology laboratory must have the following information on the requisition prior to processing the specimen (College of American Pathologist regulation).

   i. Material submitted (wet tissue, slides or blocks)
   ii. Type and location of the tissue submitted: (i.e: Corneal button, left eye)
   iii. Clinical history, data and operative findings
   iv. Clinical diagnosis
   v. Date of surgery
   vi. Patient's complete name
   vii. Patient's address
   viii. Sex of patient
   ix. Date of birth or age of patient
   x. Name of referring physician and institution

Note: If there is more than one referring physician, institution and/or pathologist, please indicate this on the requisition so that we may send copies of the final report to the correct individuals and/or institutions.

   xi. Address of each referring physician, institution or pathologist
   xii. Provide a HIPAA compliant (secure from the public) fax number to send report to when final
   xiii. Any special instructions or communications to the laboratory (ie: rush or stat cases, instructions to understand margins, etc.)