

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.)