

GYN CYTOLOGY REQUISITION

Patient Name* _____ Sex* _____ DOB* ____/____/____

Patient Address _____ City _____ State _____ Zip Code _____

Requesting Doctor* _____ Referring/Attending Doctor _____

Copies to: (Must provide complete name and address) _____

Fax: _____ Call: _____

Primary Insurance* _____ Policy # _____ Group # _____

Insurer Address* _____

Subscriber Name* _____ Relation to Patient _____ State _____

Secondary Insurance _____ Policy # _____ Group# _____

Subscriber Name _____ Relation to Patient _____ State _____

Specimen Information*	Collection Date:* _____	Collection Time: _____	Received Date: _____	ICD-9 Code (Required) _____
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Please check one box in this section:*

- SCREENING PAP: () High-risk of cervical cancer, screening recommended by physician more often than based on history
- DIAGNOSTIC PAP: History, signs or symptoms of abnormality ICD-9 code _____

SPECIMEN SOURCE:* Cervix Endocervix Vagina Other (specify): _____

ThinPrep®+Imaging:

- Pap Test
- High Risk HPV Reflex / ASC-US
- High Risk HPV (All Atypical Results)
- HPV 16/18 Genotype

ThinPrep®: (manual screen)

- Pap Test
- High Risk HPV Reflex / ASC-US
- High Risk HPV (All Atypical Results)
- HPV 16/18 Genotype

High Risk HPV Testing Only

- High Risk HPV ThinPrep
- High Risk HPV SurePath
- HPV 16/18 Genotype ThinPrep
- HPV 16/18 Genotype SurePath

Chlamydia/GC on Pap

Chlamydia/GC (DNA)

Chlamydia/GC (SDA)

Conventional PAP SMEAR (1-2 SLIDES)

LAST MENSTRUAL PERIOD:* _____ **DATE OF LAST PAP:** _____

- | | |
|---|---|
| <input type="checkbox"/> TOTAL HYSTERECTOMY | <input type="checkbox"/> SUPRACERVICAL HYSTERECTOMY |
| <input type="checkbox"/> PREGNANT ____ WKS | <input type="checkbox"/> POST PARTUM ____ WKS |
| <input type="checkbox"/> IUD | <input type="checkbox"/> PREV RADIATION OR CHEMO |
| <input type="checkbox"/> POSTMENOPAUSAL | <input type="checkbox"/> HORMONE THERAPY: (SPECIFY) _____ |

CLINICAL HISTORY:

PREVIOUS RESULTS:

Fields marked with an Asterisk are MANDATORY. Specimens submitted without complete information may not be processed