

PATIENT DETAILS:	Eor office use only				
NAME:	For office use only				
AGE: GENDER:	CeDARC NO:				
HOSPITAL:	DATE OF RECEIPT:				
BHT/ IDENTIFICATION NO:	SPECIMEN TYPE: SPECIMEN FOR				
Bitty IDENTIFICATION NO.	HISTOLOGY/ WAX BLOCKS ± SLIDES				
	IDENTIFICATION NUMBER:				
SPECIMEN DETAILS:	NO OF WAX BLOCKS:				
SPECIMEN:	NO OF SLIDES:				
	SPECIMEN ACCEPTED BY:				
CLINICAL HISTORY:					
INVESTIGATION RESULTS:					
WORKING DIAGNOSIS/ DIFFERENTIAL DIAGNOS	SIS:				
ADDITIONAL COMMENTS:					
(If sending wax blocks ± slides) NO OF WAX BL					
KEY TO BLOCKS:					
WERE THE GROSS/X-RAY/SCAN IMAGES EMAIL	ED TO office.cedarc@cmb.ac.lk? YES/ NO				

DETAILS OF REFERRING CONSULTANT:

NAME:	HOSPITAL:
CONTACT NUMBER:	E-MAIL:
SIGNATURE:	

GENERAL INSTRUCTIONS:

- Please print both sides of the form and fill completely when sending specimens.
- The laboratory will generally be open Monday Friday (except public holidays) 8.30 am to 4.00 pm for specimen acceptance. (Please see the notice board on our website <u>www.cedarc.cmb.ac.lk</u> for updates on special dates of closure – eg: Sinhala New Year and Christmas holidays).
- Please ensure to include the **contact number, signature and official seal** of the referring consultant.
- If sending an already grossed/ reported specimen, at least one wax block from a representative area needs to be included for specimen acceptance, irrespective of the availability of the initial slides.
- When sending wax blocks ± slides, please ensure the key to blocks/ slides is included overleaf.
- Please send a copy of the preliminary pathology report issued, if available.
- Please note:
 - While the referral may be sent to a specific consultant attached to CeDARC, it will be a panel of consultant pathologists who will be reporting on any given case.
 - Multi-disciplinary team (MDT) meetings are held on specified dates at CeDARC. Inclusion of referrals for these MDT meeting for online/ onsite participation can be arranged, when necessary, by prior arrangement. Please contact CeDARC for further details.
 - A fee will be applicable for referrals from the private sector for consultation and any additional tests performed. The patient/ guardian will need to be contacted if additional tests are required for assessment, which will be done once the necessary payments are made.

FOR OFFICE USE ONLY

BILLING INFORMATION (For cases from the private sector):

Contact person:	
Mobile number:	

Purpose	Informed on/ by	Date of	Invoice	Comments
		payment	number	
Consultation and				
initial assessment				