

## Test Ordering

- All tests must be ordered by a physician or an authorized physician assistant. Gynecologic cases may be ordered by midwives.
- A Cytology requisition form consists of one page. The form must include the following information:
  - a. Complete patient name;
  - b. Medical record number, patient location;
  - c. Date of birth, type of specimen, date of specimen taken;
  - d. Name of physician, physician assistant, midwives;
  - e. Clinical history, other pertinent data.

\*Note: Clinical history for Gynecologic PAP Test must contain the following:

- a. LMP (last menstrual period) or menopausal status;
  - b. Previous history of abnormal smears or pathological reports;
  - c. Recent operation or procedures;
  - d. Past or present radiation or chemotherapy;
  - e. Hormonal or other drug therapy;
  - f. Other pertinent data.
- The form containing the above information must accompany the specimen.
- The specimen will be returned to its origination as a rejected specimen if the critical information for the patient's identity is not complete.
- Patient's complete name, Date-of-birth and/or MR number must be labeled on smears and specimen containers. Submit specimens to the Cytology Lab as soon as possible.
- If delay is unavoidable, or if the specimens collected during the Lab. off-hours, deliver the specimens to Central Accessioning room A2-428.
- Smears: Patient name must be printed at the frosted end of the slide. #2 soft pencils are recommended.