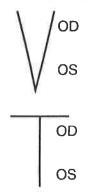
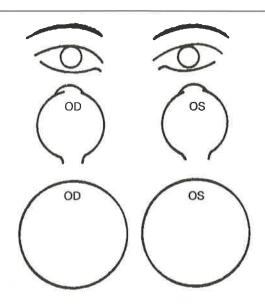


PATHOLOGY REQUEST FOR SERVICE FORM

Anienda si nati we	orid a beat									
EYE PATHOLOG	Y LABOR	RATORY (215) 92	28-3280	3 BIL	L PATIENT	☐ BILL FACILITY	☐ INS. INFO ATTACHED			
PATIENT NAME (LAST, F				☐ RUSH SERVICES ☐ ROUTINE SERVICES						
DATE OF BIRTH AGE SEX HOME PHONE			E PHONE	MEDICAL REG	CORD		FOR LAB USE ACCESSION NUMBER	DATE RECEIVED		
PATIENT STREET ADDR	ESS			L						
PATIENT CITY, STATE, Z	חו					PREOPERATIVE	DIAGNOSIS			
REFERRING PHYSICIAN/CONTRIBUTOR DATE OF SURGERY				RY	SURGICAL PROCEDURE					
REFERRING PHYSICIAN	N/HOSPITAL S	TREET ADDRESS				LIST SPECIMENS	SSUBMITTED			
REFERRING PHYSICIAN	V/HOSPITAL C	ITY, STATE, ZIP								
SOUR(CE OF MA	TERIAL PRIVATE OUTPATIENT	TECHNICIAN	DATE COM	PLETE					
PREVIOUS SURGERY (OTHER				RENDERING PH	VOICIAN			

HISTORY, PHYSICAL EXAMINATION, PERTINENT LABORATORY DATA





1	CODE		1	CODE		1	CODE		
	88300	Foreign Body (Gross Only)		88307	Enucleation			Consultation, Comprehensive, with Review of Records	
L l	88300	Specimen Did Not Survive Processing		88307	Evaluation of Surgical Margins/Resection			and Specimens	
	88300	Unable to Process/ Lost in Transit		88307	Orbital Tumor		88331	Frozen Section (Single)	
	88302	Oculoplastic Repair (Skin)		88307	Skin, Soft Tissue Mass (Not Lipoma) Biopsy		88332	Frozen Section (Each Additional)	
	88304	Abscess (Cornea, Iris, Orbital, Gland)		88309	Orbital Exenteration		TE	ECHNICAL COMPONENTS (LAB USE ONLY)	
	88304	Chalazion		88309	Soft Tissue, Tumor Extensive Resection (Globe Resection)		88311	Decalcification Procedure	
	88304	Conjunctiva Biopsy		88108	Cytospin Preparation (Vitreous Fluid)		88312	Special Stains (Organism Stains) Group I	
	88304	4 Corneal Button		88172	Cytopathology, Immediate Evaluation of Fine		88313	Special Stains (Nonorganism Stains) Group II	
	88304	304 Descemet's Membrane		001/2	Needle Aspirate		88342	Immunohistochemistry (Single)	
	88304	Pterygium		88173	Cytopathology, Evaluation, and Interpretation		88341	Immunohistochemistry (Each Additional)	
	88304	Skin, Lipoma		88160	Cytopathology (Smear)				
	88304			88177	Immediate Cytohistologic Study, Each Separate Additional Evaluation Episode, Same Site		CPT COD	E MISCELLANEOUS	
	88305								
	88305	Artery Biopsy (Temporal Artery Biopsy)		88187	Flow Cytometry, Interpretation; 2 - 8 Markers				
	88305	Cyst, NOS, Nonneoplastic		88188	Flow Cytometry, Interpretation; 9 - 15 Markers				
	88305	Evisceration (Removal of Eye Contents)		88189	Flow Cytometry, Interpretation; 16 or More Markers				
	88305	Nevus Skin, Nevus Conjunctiva		88321	Consultation and Report on Referred Slides				
	88305	88305 Skin (Other than Cyst, Tag, or Debridement)		00321	Prepared Elsewhere				
	88305			88323	Consultation and Report on Referred Material				
	88305 Victrectomy (Cell Block)			00323	Requiring Preparation of Slides (Block)			×	