

Molecular Pathology Request Form

Molecular Pathology, Department of Laboratory Medicine,
Royal Infirmary of Edinburgh, 51 Little France Crescent, Edinburgh, EH16 4SA
Tel. 0131 242 7141 molecular.pathology@nhslothian.scot.nhs.uk
www.edinburghlabmed.co.uk



REQUESTOR DETAILS:

Sending Department:			
Requesting Clinician:			
Report to be issued to (clinician/location):			
Contact Telephone:		Email:	

PATIENT DETAILS:

Surname:		Forename:		
CHI (or Date of Birth):			Sex:	M <input type="checkbox"/> F <input type="checkbox"/>
Address (if CHI not available):				
Specimen Ref. No.:		Specimen type:		
Sample collection date:		Priority:	Normal <input type="checkbox"/> Urgent <input type="checkbox"/>	
Family history (if known):				
Pedigree/reference number:				

TESTING REQUESTED:

Lynch syndrome investigation (MMR IHC/MSI/MLH1/BRAF/POLE mutations, as appropriate)	<input type="checkbox"/>
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Please provide any additional clinical information or contact laboratory for further information:

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Please forward the H&E slides, +/- blocks and a copy of the pathology report to Molecular Pathology at the above address. Please note that requests for tissue blocks and H&Es should be directed to the Pathology Department – loth.pathologyofficerie@nhslothian.scot.nhs.uk / 0131 242 7147.

FOR LABORATORY USE ONLY

No. Slides received:		No. Blocks received:	
Block numbering:			
Slides used for DNA extraction:		Date returned:	