The Pennine Acute Hospitals NHS Trust	P-FORM-3	
	Request for an additional pathology test on a sample	
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Pathology Department – Request for additional tests

There is no need to routinely contact the Laboratory by phone unless the additional test is URGENT (or if specified below); your request will be processed as soon as possible.

Biochemistry / Haematology

Royal Oldham Hospital, North Manchester General Hospital and Fairfield General Hospital-Please send the completed form via the Pneumatic air tube system to the Laboratory on your site.

Additional test requests from Rochdale Infirmary - Please telephone 71515/71514 (Biochemistry Department ROH)

Microbiology / Virology

Email completed form to <u>pah-tr.pennine-micro-reports@nhs.net</u> (must be sent from another NHS.net account to maintain encryption)

Please provide clinical details / reason for additional request:

Sample Number e.g. B1234567A L01234567A *	Hospital Number	DOB & Initials	Additional tests required
Date of sample:			
Requested by:	Ward:		Lab use only :
Date & Time:	Tel/Bleep:		

It is essential the above details (including contact details) are completed otherwise your additional request may not be processed.

Author: Delia Gallagher Approved by Pathology Quality Group

^{*} If the sample number is not available, please include the initials and date of birth of the patient and the date of the sample.