



UNIT STOMATOLOGI
INSTITUT PENYELIDIKAN PERUBATAN
KUALA LUMPUR
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50588 Kuala Lumpur
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Request For Paraffin Blocks/ Slides

Note:

- Please fill in this form in **1 COPY**
- This form should be filled in by a clinician and countersigned by a specialist
- The request will be processed within 3 working days and will be sent by post/despatch
- The diagnostic material must be returned within 30 days

1. DETAILS OF THE PATIENT

Patient's name	
I/C & HPE number	
Requested date	

2. DETAILS OF THE DIAGNOSTIC MATERIAL REQUESTED

Material	<input type="checkbox"/> Paraffin block <input type="checkbox"/> H&E slides <input type="checkbox"/> Others:
Name of the attending Oral Pathologist	
Purpose	

3. DETAILS OF THE REQUESTING OFFICER

Name	Clinician	Specialist
Sign } Designation } Department } Hospital }	Official cop	
Phone/ ext. num or H/p Number		

4. FOR OFFICE USE

Name	Sender	Collector
Sign } Designation } Department } Hospital }	Official cop	
Return details	<input type="checkbox"/> Yes <i>Date for return:</i>	<input type="checkbox"/> No
Date returned		