KWB PATHOLOGY ASSOCIATES
PATHOLOGY ASSOCIATES
1899 EIDER COURT - P.O. BOX 14389
TALLAHASSEE FL 32317
(850) 878-5143 (888) 878-5143

Facility Name

Facility Address

Facility Phone Number

Provider Full Name

Provider NPI

SURGICAL PATHOLOGY REQUEST

LAST NAME | FIRST NAME | MI

DATE OF BIRTH | RACE | SEX

SOCIAL SECURITY NUMBER

PATIENT ID#

☐ STAT ☐ DUPLICATE REPORT TO:

BILLING INFORMATION

PATIENT ADDRESS | APT. #

CITY | STATE | ZIP

HOME PHONE# | WORK PHONE#

BILL TO (PLEASE CIRCLE)

☐ DOCTOR ☐ PATIENT ☐ CHP ☐ MCR ☐ MCD ☐ OTHER

PRIMARY INSURANCE NAME

ADDRESS

INSURED NAME

ID # | GROUP #

SPECIMEN INFORMATION

DATE TAKEN: ____/____/____

☐ CERVICAL BX @ ___ O'CLOCK ☐ VAGINAL BX
☐ ENDOCERVICAL BX ☐ VULVA BX
☐ ENDOMETRIAL BX ☐ OTHER: _____

CLINICAL INFORMATION
PREVIOUS SURGERY AND DIAGNOSIS

LAB USE ONLY

[ ] HISTORY DONE

FOR BARCODE LABEL ONLY

cap ACCREDITED