



# Pathology Consultation Request

Please complete this form accurately in order to proceed with the timely review of the consult case(s).

Cases must include a **Pathology Report** and **Medicare Billing Information** (if applicable).

If there are questions please **call (480) 301-8021** or **fax (480) 301-9158**.

<b>Patient Name</b> (last, first, middle)	<b>Social Security Number</b> (for identification purposes only) ____ - ____ - ____
<b>Date of Birth</b> (mm/dd/yyyy)	<b>Gender</b> <input type="checkbox"/> Male <input type="checkbox"/> Female

	Case #1	Case #2	Case #3
<b>Accession Number</b>			
<b>Specimen Source</b>			
<b>Procedure Date</b>			
<b>Number of Slides/Blocks/CDs</b>			

If more than 3 cases are submitted per patient, another form must be filled out.

Multiple cases may be sent together if packaged separately within one larger mailing package.

<b>Referring Physician</b> (last, first)	<b>NPI#</b>	<b>UPIN#</b>	<b>Institution Name</b>
<b>Mailing Address</b>			
<b>Billing Contact &amp; Phone No.</b>	<b>Physician Phone No.</b>		<b>Physician Fax No.</b>
Ship to:  <b>Mayo Clinic Arizona</b> Department of Pathology 13400 East Shea Boulevard Scottsdale, Arizona 85259 <b>(480) 301-8021</b>	Available MCA Consultation Services (check one - <b>REQUIRED</b> ) <input type="checkbox"/> Breast Pathology <input type="checkbox"/> Gynecologic Pathology <input type="checkbox"/> Cytopathology <input type="checkbox"/> Hematopathology <input type="checkbox"/> Dermatopathology <input type="checkbox"/> Liver Pathology <input type="checkbox"/> Gastrointestinal Pathology <input type="checkbox"/> Pulmonary Pathology <input type="checkbox"/> Genitourinary Pathology <input type="checkbox"/> Other _____		

Please fax additional report to (additional physicians):

<b>Name:</b>	<b>Fax:</b>
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We cannot guarantee that "STAT" consultation cases will be read immediately. We will do our best to respond in a timely manner. For any urgent cases, please provide all contact information necessary to reach the responsible physician, including after hours phone numbers.

This form is located on the Internet at <http://www.mayoclinic.org/labmed-pathology-sct/>.

