



Date:

Clinic/Physician Name and Address:

Patient First Name	Patient Last Name	# of Specimens per Requisition	Physician / Sender Initials	Dynacare Histology Staff Initials

For Physician/Sender
Total Number of Specimens Shipped:

Dynacare Histology staff
Total Number of Specimens Received:

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Created By: Humeera Zuberi	Department: Histology	