

Mid Florida Pathology

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For specimen pick up,	picase can 332-30	0-0703				
PATIENT INFORMATION	Date of collection: Time of collection:					
Name First	Last		PHYSICIAN	INFORMATIO	DN	
Month Day Sex Birth Date	Year					
Sex Birth Date						
Social Security# Hosp./Clinic#						
Street Address/Apt.#						
City State Zip						
Phone (Home)	(Work)					
PRIMARY INSURANCE	Self Pay In	surance	SECONDAI	RY INSURANCI	E None	
Please include a copy of insurance card and patient ID.						
Insurance Company	Insurance Compar	Insurance Company				
			Subscriber/Member# Group#			
Subscriber/Member#	Claim Address					
Claim Address			Ciami Audites			
City State Zip			City State Zip			
Specimen A: ☐ Right	☐ Left	Riş	ght	Specimen B:	☐ Right	☐ Left
Specimen ☐ Biopsy shave ☐ Biopsy punch	☐ Nail biopsy			Specimen ☐ Biopsy shave	☐ Biopsy punch	☐ Nail biopsy
Excision Aspiration	<u> План бюр</u> ѕу		1/	Excision	Aspiration	□ Ivan biopsy
Skin/Soft Tissue		l (\	<i>J</i> (Skin/Soft Tissue		
☐ Dermatitis ☐ Ulcer ☐ Pigmented lesion	Tumor		\leq	☐ Dermatitis ☐ Pigmented lesion	Ulcer	Tumor
Non-pigmented lesion (verruca/rule out	carcinoma)	$\lfloor m_1 \rfloor$		☐ Non-pigmented le	esion (verruca/rule out ca	arcinoma)
Other (explain):		\	11	Other (explain):		
Nail ☐ Higher Sensitivity and melanin screen(PAS/GMS/FM)				Nail ☐ Higher Sensitivity and melanin screen(PAS/GMS/FM)		
(Dematiaceous fungi / Melanoma)				(Dematiaceous fungi / Melanoma)		
Higher Sensitivity(PAS/GMS)		Left		Higher Sensitivity(PAS/GMS)		
☐ Pigmented lesion ☐ Tumor ☐ Nail dystrophy-histology with PAS				☐ Pigmented lesion ☐ Tumor ☐ Nail dystrophy-histology with PAS ☐ Nail dystrophy-fungal culture		
☐ Nail dystrophy-fungal culture			()			
Other (explain):			/ \	Other (explain):		
Bone			لاسا	Bone		
☐ Osteomyelitis (infectious) ☐ Tumor ☐ Degenerative disease (hallux abducto-valgus/hammer toe)				☐ Osteomyelitis (infectious) ☐ Tumor ☐ Degenerative disease (hallux abducto-valgus/hammer toe)		
Other (explain):		l	("")	Other (explain):		
Microbiology) /	Microbiology		
Bacterial Culture Aerobic and Bacterial S	•		()		Aerobic and Bacterial Ser	•
☐ Bacterial Culture Anerobic and Bacterial ☐ Fungal Culture	Sensitivity/Gram Stain			Fungal Culture	Anerobic and Bacterial S	ensitivity/Gram Stain
Diagnosis:	Aspiration:		Diagnosis:		Aspiration:	
Toe: RT 1 2 3 4 5 LT 1 2 3 4 5	☐ Neoplasm unsp bon	e/skin/sq D49.2	Toe: RT 1 2 3 4 5	LT 1 2 3 4 5	☐ Neoplasm unsp	oone/skin/sq D49.2
Nail: Culture:		Nail:	Nail:		Culture:	
☐ Disorders nail, unsp L60.9 ☐ Infection sk/sq L08.09			☐ Disorders nail,		☐ Infection sk/sq L08.09	
☐ Onychomycosis B35.1 ☐ Disorders skin/sq unsp L98.9	☐ Abcess FT/Toe RT L☐ Abcess FT/Toe LT L		☐ Onychomycosi ☐ Disorders skin/		☐ Abcess FT/Toe F☐ Abcess FT/Toe I	
□ Disorders skin/sq unsp £98.9		,		oq uпор 1.70.7	_	
Skin: Other Diagnosis:			Skin: Other Diagnosis: Disorders skin/sq unsp L98.9 Contact Dermatitis unsp L25.9			
☐ Contact Dermatitis unsp L25.9						
☐ Benign Neoplasm Skin RT D23.71			☐ Benign Neoplasm Skin RT D23.71			
□ Benign Neoplasm Skin LT D23.72 □ Benign Neoplasm Skin LT D23.72						