



Pathonomics
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HISTOPATHOLOGY/ CYTOLOGY REQUEST

Title	Mortuary:	NOTE: Please send family wishes and notification of inquest completion to coroners@pathonomics.com to allow us to comply with HTA
Patient Name	Address for Report	
Patient Surname		
Date of Birth	Date of Death	Address for invoice
Coroner's Reference		
Specimen(s) sent		Number of pots sent
Clinical Details & Provisional Diagnosis		
Date of Biopsy	Requesting Clinician	Signature