

Date: September 13, 2010

To: South Zone - West
All Physicians & Nursing Unit Managers

From: AHS Laboratory Services – South Zone (West)
Dr. Barbara Popma, Acting Medical Director
Dr. Csaba Hegedus, Cytology Consultant Pathologist

Re: 24-10 Non Gynecological Cytology Request Form

PLEASE POST OR DISTRIBUTE AS WIDELY AS APPROPRIATE

Key Message:

Effective immediately, the Chinook Regional Hospital Cytology Request Form (#101945) has been revised to contain information required only for non gynecological specimens.

New clinical information sections have been added in 3 sections

- Non Gynecological Cytology Patient History
- Clinical Presentation of the Lesion
- Imaging Appearance of the Lesion.

Why this is important:

Complete clinical information will assist in providing an accurate diagnosis to the physician.

Action Required:

- Complete all relevant information in the following sections:
Non Gynecological Cytology Patient History, Clinical Presentation of the Lesion and Imaging Appearance of the Lesion.
- Replace all previous Cytology Request forms (#101945) with the revised form dated 07/10 in the bottom right hand corner.

Inquiries and feedback may be directed to:

Denise Laperle, Cytology Technical Supervisor at 403-388-6162 or
Dr. Csaba Hegedus, Cytology Consultant Pathologist at 403-388-6628

This bulletin has been reviewed and approved by Dr. B. Popma, Acting Medical Director