



DIVISION OF ANATOMIC PATHOLOGY Outreach Consult Requisition Form

pathologyconsult@texaschildrens.org
Phone: 832-824-2250
Fax: 832-825-1032

TODAY'S DATE

REASON FOR REVIEW

Primary diagnosis _____ Previous consults / material reviewed at TCH? _____
Transfer of care _____
Second opinion _____ Yes _____
on completed case _____ No _____ Unknown _____

REFERRING PHYSICIAN

Name _____
Phone _____ E-mail _____
Texas Children's service requesting review (if applicable): _____
Consult pathologist or requested subspecialty (if known): _____

CONTACT TO RECEIVE REPORT

Name _____
Institution/Hospital _____
Street Address _____
Address Line 2 _____
City _____
State _____ Zip _____ Country _____
Phone _____ Fax _____
E-mail _____

SAMPLE INFORMATION

For ancillary stains/studies, we prefer 10 unstained slides rather than Paraffin blocks. (We will request additional materials if necessary.) Please include relevant diagnostic reports and clinical history along with pathology materials.

PATIENT INFORMATION - 5 Patient Identifiers Required

Patient Name _____
Medical Record Number _____
Date of Birth _____
Gender: Male Female Unknown
Patient Facesheet with 2 additional identifiers:
Provided Not available
Provide the following if Patient Facesheet is not available:
Patient Address _____
Patient Phone Number _____

BILLING INFORMATION

Patient Insurance (Please attach insurance demographics.)
Institutional Billing (Please fill out information below.)
Institution/Department _____
Street Address _____
Address Line 2 _____
City _____
State _____ Zip _____
Billing Contact _____
Phone _____ Fax _____
E-mail _____

MAILING INSTRUCTIONS

PLEASE EMAIL YOUR PACKAGE TRACKING NUMBER TO: pathologyconsult@texaschildrens.org
When your package is received, we will email your TCH consult case number and name of the pathologist handling the case.

Ship to: Pathology Consult Desk
6621 Fannin St.
Suite AB1195
Houston, TX 77030
Phone: 832-824-2250

Checklist of Materials Enclosed:

Pathology Reports
Radiology Reports
Operative/Surgery Reports
_____ # of Stained Slides
_____ # of Unstained Slides
Insurance Demographics (If NOT Institutional Billing)
Other _____

QUESTIONS?

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