DEPARTMENT of CYTOLOGY
REQUEST FOR CYTOLOGY
EXAMINATION

PURPOSE OF SMEAR:
Reg. Periodic Exam
Follow-up Exam

TYPE OF SPECIMEN:
Cervical Scrape
Endocervical Brush
Vaginal Scrape

To be filled in by Attending Physician

Menses – LMP
MO DAY YR

PLEASE CIRCLE:
Regular
Irregular
Abn. Bleeding
Post Menopausal
Now Pregnant
Post Partum

PLEASE INCLUDE
INSURANCE INFORMATION

HPV Hybrid Capture Typing
HPV Hybrid Capture test, ONLY if pap diagnosis is ASCUS

04/02/07 dls