# barts_black_large

**BLIZARD INSTITUTE**

**CORE PATHOLOGY**

**PATHOLOGY AND PHARMACY BUILDING**

**80 NEWARK STREET**

**LONDON E1 2ES**

**Report Enquiries: 0203 246 0215**

**Technical Enquiries: 0203 246 0155**

**Email: core-pathology@qmul.ac.uk**

**POST-MORTEM HISTOPATHOLOGY**

If there is a risk of infection please place hazard label here

and indicate nature of risk

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Coroner’s Ref/PM No** | | | | **Consultant Name and Address for Slides** | | |
| **Family Name**  **(Block Capitals)** | | | |
| **Given Names** | | | | **Name and Address for Invoice** | | |
| **Mortuary/Coroner** | | | |
| **Sex** | **DOB/Age** | | **DOD** |
| **Nature of Specimen** | | | | | | **Number of Specimen Pots Sent** |
| **CLINICAL DETAILS AND PROVISIONAL DIAGNOSIS**  (Where appropriate, please give details of Race/Country of Origin /Foreign Travel /Medication /Radiotherapy / Chemotherapy) | | | | | | |
| **Date of PM** | | **Requesting Clinicians Name and Contact Number**  (Please Print) | | | **Signature** | |

**DOCUMENT HISTORY**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| VERSION | EVENT | DATE | AUTHOR | AUTHORISED |
| 1 | Issued | 31/10/2018 | Lorraine Singer | Pauline Levey |
| 2 | Reviewed and updated | 01/07/2021 | Laura Neal | Pauline Levey |
| 2.1 | Reviewed and updated | 30/10/2023 | Laura Neal | Pauline Levey |
| 3.0 | Reviewed and updated | 22/10/2024 | Laura Neal | Pauline Levey |