

# NORTON CHILDREN'S HOSPITAL ELECTRON MICROSCOPY LABORATORY

## PLATELET EM REQUISITION

Peripheral blood is processed for Whole Mount and Thin Section Microscopy for comprehensive platelet ultrastructural analysis. An integrated report is provided.

Patient Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Medical Record Number: \_\_\_\_\_

Date of order: \_\_\_\_\_

### Referring Physician:

Name: \_\_\_\_\_

Institution: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

### Copy of Report to:

Name: \_\_\_\_\_

Telephone number: \_\_\_\_\_

Fax number: \_\_\_\_\_

Same as Referring Physician

**M.D./PhD.**

### PHYSICIAN SIGNATURE

#### **SPECIMEN REQUIREMENTS AND INSTRUCTIONS:**

❖ Collect peripheral blood (2 mL minimum) in an **EDTA 3 ML PURPLE TOP TUBE**. Send specimen at ambient temperature via overnight delivery. Do NOT agitate / shake, refrigerate, or freeze sample. If necessary, please call to have EDTA tubes sent in advance. Specimens are accepted 7 days a week. Turnaround time is approximately 48 business hours from specimen delivery.

❖ **Please also send Patient Financial sheet**

#### **SPECIMEN DELIVERY ADDRESS:**

Attn Dr. Jessica Hata  
Norton Children's Hospital Electron Microscopy Laboratory  
231 East Chestnut Street, Pathology Suite Number 260  
Louisville, Kentucky 40202  
Tel: (502) 629-7900  
Fax: (502) 629-7906