John A. Hipp, M.D. Ward D. Fredrickson, M.D. Michael J. Laszewski, M.D. Laurie J. Linz, M.D. Wesley A. Ellison, M.D.		NON-C	Pathology Consultants, P.C. Bringing Pathology Services to Your Community NON-GYN CYTOLOGY REQUEST FORM S MUST BE COMPLETED FOR THIRD PARTY BILLING				3502 Franklin Av Box 2036 Bismarck, ND 58 Phone (701) 222- (800) 645 Fax (701) 258-		
		FIRST NAME			I CHART NUMBER		CONTROL NUMBER		
RESPONSIBLE PART	Y	PATIENT MALE FEMALE	DATE OF SERVICE	CLIENT NAME			CLI	IENT#	
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SEND ALL	SPECIMENS IN	EQUAL VOLUM	E CYTOLYT		Form must be	completed & legible	e for patient	billing.	