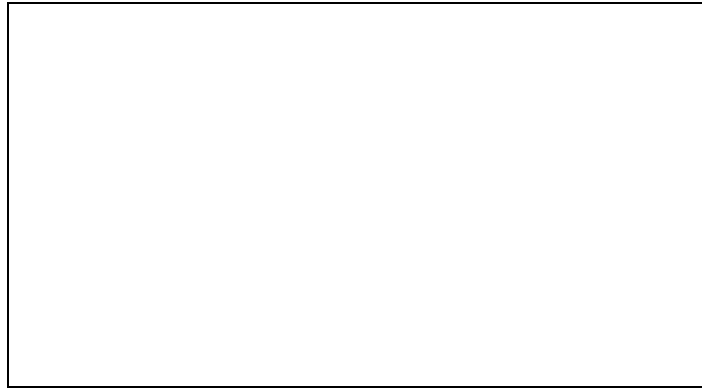


Request for Outside Laboratory Tests

Note to patient:- This form cannot be used for lab work at the BC Cancer site laboratory.

This request form is for patients who can have their lab work taken and performed by outside laboratories (such as Lifelabs, BC Bio or other laboratory services).



Please perform the following test(s) ordered by Dr.....MSC#.....

	Date	Date	Date	Date
<input type="checkbox"/> CBC (HgB, WBC, platelets), Differential				
<input type="checkbox"/> Creatinine				
<input type="checkbox"/> Urea				
<input type="checkbox"/> Liver Function tests (T.bili, alk phos, GGT, AST, LD)				
<input type="checkbox"/> PSA and TTT (Prostate Cancer patient)				
<input type="checkbox"/> CA125 CA15-3 CA19-9				
<input type="checkbox"/> .				
<input type="checkbox"/> .				

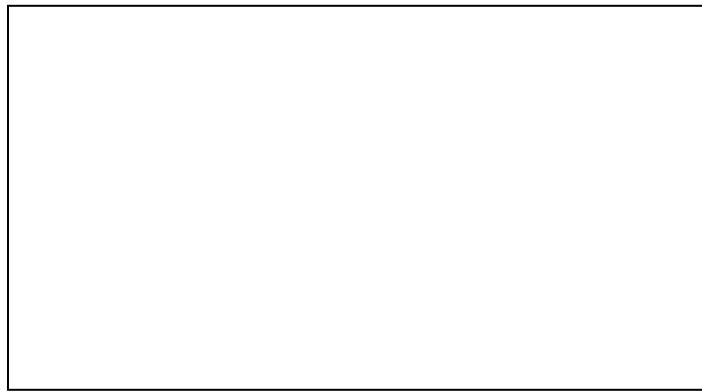
Please Fax or telephone results as indicated (note: do not fax if results are electronically transferred to BCCA)

- FAX - 604-.708-2000 Health records FAX - 604-708-2106 (Oncology fax)
 Call - 604-877-6000 local.....

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