

Specialist Diagnostic Services Pty Ltd (ABN 84 007 190 043) t/a QML Pathology APA No.000042 11 Riverview Place, Metroplex on Gateway, Murarrie, Qld, 4172. Ph (07) 3121 4945

## DO NOT BULK BILL

Request to be pre-paid at time of collection by Credit Card ONLY.

## PATIENT SELF REQUEST FORM

PATIENT FAMILY NAME	GIVEN NAMES		SEX	DATE OF BIRTH	FILE No.	
PATIENT ADDRESS		POSTCODE		TEL (HOME & MOBILE)	TEL(BUS)	
Patient self reque	est - PRIVATE & CONFIDENTIAL				Is patient:	Fasting ☐ Non Fasting ☐
•						Nonrasting [
Please tick test/s you	u require:					
☐ Hair Drug Screen						
☐ Carbohydrate De	ficient Transferrin (CDT)					
QML Pathology U	Jse:					
Request must be PRE-PA	ID AT TIME OF COLLECTION by Credit Card ONLY	Pre-Paid Re	ceir	ot Number:		
Photo Identification S	•		ır	N. N		
☐ Drivers License	□ Passport □ Other:		_ IL	Number:		
	nt Transferrin (CDT) Chain of Custody completed	I				
•	plete below - TICK ONE OPTION ONLY:	(Nata	Da <b>t</b> : a	ant Deculte CANNOT he	, , , , , , , , , , , , , , , , , , ,	
	ivered to Patient address as indicated on this req be picked up from this Collection Centre by patie		Patie	ent Results <u>Cannol</u> de e	emailed)	
ACC code:	ACC ph	one number:				
*Advise patient to CALL COL	LECTION CENTRE prior to picking up laboratory report (Tick where applicable)	(photo identificatio	n wi	ill be required).		
-	mented on this form are from the sample provided collected in compliance with the requirements of t	•			ication below.	
•	ecimen Collection that includes Drugs of Abuse tes	J				
COLLECTOR NAME:	COLLECTOR	SIGNATURE:			DATE:	//
	PATIENT'S SIGNATURE AND DATE			REQUESTING DOCTOR, WORKPLAC		FFICER
and correct. I understand	tion provided on this form by myself to QML Patholog; that I will receive a copy of this form and that a labora the method indicated above.	tory	ML F	<b>NT SELF REQUEST</b> Pathology or Maintenance Departm	RPS1S ent	-

I have read and understood the disclaimer at the bottom of the page.

PATIENT'S SIGNATURE DATE

11 Riverview Place

MURARRIE QLD 4172

Disclaimer: QML Pathology advises that pathology tests are usually requested by a patient's doctor as they are medically qualified to interpret and/or analyse the results. QML Pathology offers a limited range of self requested pathology tests because some panels of testing are complex and there may be the possibility of misinterpretation of pathology results in the absence of medical symptoms discussed as part of a medical consultation. Patients requesting self determined testing will need to consult their local medical professional if they require interpretive advice

	Collect Date	Coll. Time	Test Codes		Branch	Ref. No.	Lab. No.	Description & Containers	Collector
L U									
A S	Received Date	Date Rec. Time	B/C		Clinic				
				PP					