

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

report will be delivered in the method indicated above.

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

## 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	<u>.</u>	SEX	DATE OF BIRTH	FILE No.	
PATIENT ADDRESS	POS	TCODE		TEL (HOME & MOBILE)	TEL(BUS)	
TESTS REQUESTED	DDIVATE & CONFIDENTIAL				Is patient:	Fasting  Non Fasting
•	uest - PRIVATE & CONFIDENTIAL					Non Fasting □
Please tick test/s y	ou require:					
☐ Hair Drug Scree	n					
☐ Carbohydrate D	Peficient Transferrin (CDT)					
QML Pathology	Use:					
Request must be PRE-P	Request must be PRE-PAID AT TIME OF COLLECTION by Credit Card ONLY  Pre-Paid Receipt Number:					
Photo Identification	Sighted:					
☐ Drivers License	☐ Passport ☐ Other:		_ID	Number:		
□ Carbonyurate Denci	ent Transferrin (CDT) Chain of Custody completed					
☐ Laboratory report d	omplete below - TICK ONE OPTION ONLY: delivered to Patient address as indicated on this reques to be picked up from this Collection Centre by patient		Patier	nt Results <u>CANNOT</u> be	emailed)	
ACC code:	ACC phon	e number:				
*Advise patient to CALL CO	OLLECTION CENTRE prior to picking up laboratory report (pl N (Tick where applicable)	hoto identificatio	n will	be required).		
•	cumented on this form are from the sample provided to en collected in compliance with the requirements of the			o has given signed cert	ification below.	
	specimen Collection that includes Drugs of Abuse testing	_				
COLLECTOR NAME:		NATURE:			DATE:	/
	PATIENT'S SIGNATURE AND DATE		RE	QUESTING DOCTOR, WORKPLA	ACE HEALTH AND SAFETY	OFFICER
	nation provided on this form by myself to QML Pathology is ad that I will receive a copy of this form and that a laborator	.,		IT SELF REQUEST athology	GPS1J	

PATIENT'S SIGNATURE

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

**Doctor Maintenance Department** 

11 Riverview Place

**MURARRIE QLD 4172** 

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 B E	Received Date	Rec. Time		B/C <b>PP</b>	Clinic					