<u>UW Medicine</u>

PATHOLOGY

SERVICE REQUEST

908 Jefferson St, **Room 2NJ244**, Seattle, WA 98104 Phone: 206-744-3145 | Fax: 206-744-8240 | UWPathology.org

For UW Pathology use	
MRN:	Accession #

Requesting Physician (primary): Referring Physician/Surgeon: Referring Physician/Surgeon: Phone Fax NPI # Referring Physician/Surgeon: Phone Fax NPI # Additional reports to: Phone Fax NPI # NPI # Phone Fax NPI # Phone Fax NPI # Insurance* (If outpatient) Self-Pay (No insurance) Institution/Client Billing Split Billing / Medicare* (Pro to Patient, Tech to Client) *Medicare Billing policy does not permit tech claims on laboratory testing for hospital inpatients/outpatients. These tech charges will be billed to the requesting institution. Primary Insurance Secondary Insurance Insurance Address Phone Insurance Address Phone City/State/Zip City/State/Zip		NEURO	DPATHOLOGY												
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