Patient status at the time of the service or when the specimen was collected.

- a) private patient in a private hospital
- b) a private patient in an approved day hospital facility
- c) a public patient in a recognised hospital
- d) an out-patient of a recognised hospital

Medicare number

I offer to assign my right to benefits to the approved pathology practitioner who will render the requested pathology service(s) and any eligible pathologist determinable service(s) established as necessary by the practitioner.

Patient's signature

Precious/irreplaceable specimen requiring confirm receipt on Phone/Pager:

CLINICAL DETAILS

Fasting: 
OCP: 
HRT: 
Pregnant: 
Gestation: 
Medication: 
Dosage: 
Time: 

Histopathology - list previous biopsies including laboratory numbers

TESTS REQUESTED

Antibiotic: Spot
Dose: mg
Frequency: daily BD Other
START administration
FINISH administration
FIRST SAMPLE/SPOT
SECOND SAMPLE

Your treating practitioner has recommended that you use Monash Pathology. You are free to choose your own pathology provider.

However, if your treating practitioner has specified a particular pathologist on clinical grounds a Medicare rebate will only be payable if that pathologist performs the service. You should discuss this with your treating practitioner.

I certify that I collected the specimen accompanying this request from the stated patient whose details I confirmed by direct inquiry and/or examination of their ID wristband and I labelled the specimen immediately after collection in the presence of the patient.

Signed: 
Print Surname: 
Date: Time: hour

SPECIMEN TYPE: BLOOD URINE OTHER

Your treating practitioner has recommended that you use Monash Pathology. You are free to choose your own pathology provider.

However, if your treating practitioner has specified a particular pathologist on clinical grounds a Medicare rebate will only be payable if that pathologist performs the service. You should discuss this with your treating practitioner.

I certify that I collected the specimen accompanying this request from the stated patient whose details I confirmed by direct inquiry and/or examination of their ID wristband and I labelled the specimen immediately after collection in the presence of the patient.

Signed: 
Print Surname: 
Date: Time: hour
**Monash Pathology**

**Monash Health (APA)**

**Result Enquiries** 9594 4538

**Clinical Consultation**
- Anatomical Pathology & Cytology
  - Assoc. Prof. Beena Kumar 9594 3500
- Biochemistry
  - Assoc. Prof. Zhong Lu 9594 4525
- Genetics
  - Dr Meaghan Wall 9594 4124
- Haematology
  - Assoc. Prof. Sanjeev Chunilal 9594 4366
- Infectious Diseases
  - Assoc. Prof. Tony Korman 9594 4564
- Microbiology
  - Assoc. Prof. Tony Korman 9594 4564

<table>
<thead>
<tr>
<th>Collection Centre</th>
<th>Address</th>
<th>Telephone</th>
<th>Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>CLAYTON</strong></td>
<td>Monash Medical Centre Public Pathology collection rooms 246 Clayton Rd, Clayton</td>
<td>03 9594 2383</td>
<td>Monday to Friday 08:30am - 5:00pm</td>
</tr>
<tr>
<td></td>
<td>Jessie McPherson Private Hospital Private Consulting Suites Suite G 246 Clayton Rd, Clayton</td>
<td>03 9594 2469</td>
<td>Monday to Friday 8:00am - 6:00pm Saturday 8:00am - 2:00pm</td>
</tr>
<tr>
<td></td>
<td>Monash Children’s Hospital 246 Clayton Rd, Clayton</td>
<td>03 8572 3072/3</td>
<td>Monday to Friday 8:30 am - 5:00 pm</td>
</tr>
<tr>
<td><strong>BERWICK</strong></td>
<td>Casey Hospital 62 – 70 Kangan Drive, Berwick</td>
<td>03 8768 1442</td>
<td>Monday to Friday 8:00am - 5:00pm</td>
</tr>
<tr>
<td></td>
<td>Berwick Healthcare 76 Clyde Rd, Berwick</td>
<td>03 9792 8021</td>
<td>Monday to Friday 8:30 am - 5:00 pm</td>
</tr>
<tr>
<td><strong>CRANBOURNE</strong></td>
<td>Cranbourne Centre 140 – 154 Sladen St, Cranbourne</td>
<td>03 5990 6176</td>
<td>Monday to Friday 8.30am – 5:00pm Saturday 9.00am – 1.00pm</td>
</tr>
<tr>
<td><strong>DANDENONG</strong></td>
<td>Dandenong Hospital 135 David St, Dandenong</td>
<td>03 9554 1901/2</td>
<td>Monday to Friday 8:00am - 6:00pm Saturday &amp; Sunday 8:00am - 12 noon</td>
</tr>
<tr>
<td></td>
<td>Monash Health Community 122 Thomas Street, Dandenong</td>
<td>03 9792 7854</td>
<td>Monday to Friday 8:30 am - 5:00 pm</td>
</tr>
<tr>
<td></td>
<td>Monash Women’s Clinic 135 David Street, Dandenong</td>
<td>03 9792 8003</td>
<td>Monday to Friday 8:30 am - 5:00 pm</td>
</tr>
<tr>
<td><strong>FRANKSTON</strong></td>
<td>Peninsula Family General Practice 1B Vera Street, Frankston</td>
<td>0436 689 745</td>
<td>Monday to Friday 8:30am – 5:00pm</td>
</tr>
<tr>
<td><strong>LANGWARRIN</strong></td>
<td>St. Augustine Family Medical Centre Shop 18, 385 Cranbourne-Frankston Road Langwarrin</td>
<td>0417 341 357</td>
<td>Monday to Friday 8:30am – 12.30pm</td>
</tr>
<tr>
<td><strong>MOORABBIN</strong></td>
<td>Moorabbin Hospital 823 – 865 Centre Rd, East Bentleigh</td>
<td>03 9928 8178</td>
<td>Monday to Friday 8:00am – 5:00pm</td>
</tr>
<tr>
<td><strong>PAKENHAM</strong></td>
<td>Pakenham Health Centre Henty Way, Pakenham</td>
<td>03 5941 0526</td>
<td>Monday to Friday 8:30am - 5:00pm Saturday 8:00am - 12.00 noon</td>
</tr>
<tr>
<td><strong>SPRINGVALE</strong></td>
<td>Greater Dandenong Community Health Service 55 Buckingham Ave, Springvale</td>
<td>03 8558 9012</td>
<td>Monday to Friday 8:30am - 5:00pm</td>
</tr>
</tbody>
</table>

**PLEASE NOTE:**
- OPENING TIMES ARE SUBJECT TO CHANGE. CONTACT THE CENTRE OR GO TO www.monashpathology.org FOR UP TO DATE DETAILS.
- ALL COLLECTION CENTRES ARE CLOSED ON PUBLIC HOLIDAYS.

Privacy note: The information provided will be used to assess any Medicare benefits payable for the services rendered and to facilitate the proper administration of government health programs, and may be used to update environment records. Its collection is authorised by the provisions of the Health Insurance Act 1973. The information may be disclosed to the Department of Health or to a person in the medical practice associated with this claim, or as authorised/required by law.

**MONASH PATHOLOGY REQUESTS**

1. **Patient Identification**
   - Request forms and specimens must be labelled with at least 3 patient identifiers:
     - i) Surname and first name in full with correct spelling
     - ii) Date of birth
     - iii) At least one of the following - Monash Health UR number, Address, Gender

2. **Date and time of Collection**
3. **Specimen and request must be signed by the specimen collector**

REQUESTS WILL NOT BE ACCEPTED UNLESS ALL OF THE ABOVE ARE PRESENT. THIS INFORMATION IS NECESSARY FOR THE SAFETY OF THE PATIENT.