



PGH Form No. P.360003
Rev. 06 Effectivity Date: 1 April 2024

PHILIPPINE GENERAL HOSPITAL
The National University Hospital
University of the Philippines Manila
DEPARTMENT OF LABORATORIES
Taft Avenue, Manila

PHIC - Accredited Health Care Provider
ISO 9001 Certified

FOR
MICROBIOLOGY
REQUEST
Pls. Check if:

- HAI
 CAI

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LABORATORY REQUEST FORM

WARD/ROOM/BED NO/OPD CLINIC			CONTACT NUMBER
NAME (LAST)	FIRST	MI)	
AGE:	SEX:	HOSPITAL CASE NO.	
BIRTH DATE			
DIAGNOSIS:			
REQUESTED BY:			
DOCTOR'S SIGNATURE OVER TRODAT*			
LABORATORY EXAMINATION DESIRED			
Use one Request Form per specimen			
SPECIMEN	SITE OF COLLECTION	COLLECTED BY	
		TIME COLLECTED	DATE COLLECTED
NOTE: The UP-PGH Department of Laboratories reserves the right not to accept mislabeled specimens and inadequately filled request forms.			

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