**LYMPHOMA TISSUE PROTOCOL**

OR #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Time In \_\_\_\_:\_\_\_\_

\*If faculty has not preview case, mark “X” **\*\*Signatures are mandatory**

SU STICKER

SPOT

|  |  |  |  |
| --- | --- | --- | --- |
| Part | Gross (please fill all sections) | Ancillary studies (check all that apply) | Initials/Signature |
|  **Site:**   **Description:**  **Time when put in formalin** **(also write on the container):** Cassette / Chuck code summary: \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ | Flow cytometryCytogeneticsSnap frozensnap frozenOther, specify:\_\_\_\_\_\_\_ | Resident |
| Fellow |
| Faculty |
|  **Site:**   **Description:**  **Time when put in formalin:** **(also write on the container):** Cassette / Chuck code summary: \_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_ | Flow cytometryCytogeneticsSnap frozensnap frozenOther, specify:\_\_\_\_\_\_\_\_\_Time out: \_\_\_\_\_\_\_\_\_\_\_ | Resident |
| Fellow |
| Faculty |