Clinical Digital Pathology Services Request Form

To request whole slide scanning services to support clinical workflows and patient care services, please complete this intake form and send to jhenrik@uw.edu. Requests will be reviewed and new services will be on-boarded if approved, beginning with pilot projects, as the facility is capable.

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| Requestor InformationPlease list contact information for the individual(s) who should be contacted to discuss these services. |
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| Area of SupportThe clinical workflow or patient care service. |
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| DescriptionPlease provide a description of the digital imaging services requested for this workflow. |
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| JustificationPlease provide a justification or describe the improvement digital imaging services would bring to this workflow. |
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| Frequency and VolumePlease provide the predicted frequency of slide scanning services and number of slides per week. |
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| Type of Tissue and Slide PreparationWhole tissue excision/resection, biopsies, H&E, IHC, frozens, smears, cytology, etc. |
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| Image Resolution20x or 40x slide scanning required for this service? |
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| OtherPlease include any additional information you would like to include for this request. |
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