



GYN Molecular Test Add-On Request Form
ThinPrep Add On Tests Only

Date: _____ Office: _____

Patient Name: _____ DOB: _____ DOS: _____

Contact Person: _____ Phone Number: _____

Check the following Add-On test(s) appropriately as needed:

____ HPV

____ Chlamydia and Gonorrhea (CT/NG)

____ Chlamydia ONLY (CT)

____ Gonorrhea ONLY (NG)

____ Trichomonas ONLY (TRICH)

____ CINtec Plus Cytology

____ PAP (GYN)

Please fax request to 970-212-0527 OR 970-212-0553

If you have questions, please call (970) 212-0530

Thank you for the opportunity to serve you!

Summit Pathology: 5802 Wright Drive, Loveland, CO 80538 • **Phone:** 970-212-0530 • **Toll Free:** 800-920-6227

Fax: 970-212-0553 • **Web:** www.summitpathology.com

Offices Inside: North Colorado Medical Center, Medical Center of the Rockies, McKee Medical Center,
Poudre Valley Hospital, Memorial Hospital Colorado Springs and Cheyenne Regional Medical Center

