

TEST REQUEST FORM

Date: 2-2-2025

FILL IN CAPITAL LETTERS

☒ Urgent ☐ Routine ☐ Home Blood Collection ☐ HMO Enrollee No: _____

☒ Bill Patients ☐ Bill Hospital/Lab ☐ Report by E-mail ☐ Bill HMO: _____

Patient Name: Mr AKINSON, Zechariah Specify _____
Surname Others _____

Age/Sex: 54 / M Phone: _____

Doctor's Name & Signature: Dr Temifope M.

Tel: 08060758564 E-mail: drmaukson@yahoo.com

Hospital Name/Address: Cornerstone Hospital

Test Required: _____

Provisional Diagnosis & History: Rawfime

Further Investigation

BLOOD PATHOLOGY TESTS

HEALTH CHECK PLANS

- Basic HCP
- Standard HCP
- Silver HCP
- Gold HCP
- Diamond HCP
- Platinum HCP
- Pre-Employment Check-Up
- Pre-Marital Check-Up
- Domestic Staff Health Check
- Corporate Screening
- Cherry
- Home Collection Service Available

HAEMATOLOGY

- ☒ FBC/Complete Haemogram
- ☒ Hb/PCV
- ☒ WBC - Total
- ☒ Differential Leucocyte Count
- ☒ Platelet Count
- ☒ Reticulocyte Count
- ESR
- Peripheral Blood Smear Exam
- LE Cell
- PT/INR
- APTT
- D-dimer
- Fibrinogen
- Bleeding Time
- Clotting Time
- Hb Genotype
- Protein Electrophoresis
- Sickling Test
- Bone Marrow Study
- Coomb's Test - Direct

- Coomb's Test Indirect
- Blood Group
- Malaria Parasite - Bs
- Malaria Combi Test
- Microfilaria Blood
- Cell count / Type

SEROLOGY

- Anti-Streptolysin O
- Rheumatoid Factor
- C-Reactive Protein
- Widal Test
- Pregnancy Test - Urine
- Pregnancy Test - Serum
- H.pylori - Serum
- Infectious Mononucleosis/Test

HISTOLOGY

- Histology Studies (Small)
- Histology Studies (Medium)
- Histology Studies (Large)
- Immunohistochemistry (IHC)

Specimen Container

- Sample to be collected in the centre
- EDTA • Sodium Citrate
- Lithium Heparin • Fluoride Oxalate
- Plain Tube • Sterile Container

CYTOLOGY

- Pap Smear (Cervical)
- FNAC Direct
- FNAC USS/CT Guided
- Barr Bodies - Buccal Smear
- Liquid Based Cytology (LBC)
- Cytology (Fluid) Specify

IMMUNOLOGY

- ANA Screen
- DS-DNA
- Phospholipid Antibody Panel
- Cardiolipin Ab IgG
- Cardiolipin Ab IgM
- Total IgE
- Serum IgM, IgA
- Serum IgM
- Serum IgA
- VDRL
- TPHA
- Torch Panel
- Toxoplasma IgG
- Toxoplasma IgM
- Rubella IgG
- Rubella IgM
- CMV - IgG
- CMV - IgM
- HSV 1 & 2 IgG
- HSV 1 & 2 IgM
- Chlamydia Test
- Anti-HAV Total
- Anti-HAV IgM
- Hepatitis Panel
- HBsAg
- Anti-HBs Ab
- HBeAg
- HBeAb
- Anti HBC Total
- Anti HBC IgM
- Anti - HCV
- HIV I & II

CLINICAL CHEMISTRY

- Cardiac Marker
- CPK
- CPK, MB Mass
- Troponin 1
- Myoglobin
- Renal Function Test
- Sodium
- Potassium
- Chloride
- Bicarbonate
- Urea
- Creatinine
- Tacrolimus
- Calcium
- Phosphorus
- Magnesium
- Diabetic Profile
- Glucose (2HPP)
- Glucose (random)
- Glucose (fasting)
- OGTT
- HBA1C
- LDH
- Amylase
- Lipase
- G6PD

Lipid Profile

- Cholesterol - Total
- Cholesterol - HDL
- Cholesterol - LDL
- Triglycerides

Liver Function Tests

- Bilirubin (total)
- Bilirubin (direct)
- Total Protein
- Albumin
- SGPT (ALT)
- SGOT (ALT)
- Alk (Phosphatase)
- GGT

- Uric Acid
- Serum osmolality
- Creatinine Clearance
- Urine Amylase
- Urine Micro - Albumin
- Acid Phosphatase (T+Pr)
- Urinary Sodium
- Urinary Calcium
- Fluid Albumin
- CSF Glucose
- CSF Protein
- Fluid Glucose (Specify Specimen)
- Fluid Protein (Specify Specimen)

LOCATIONS

IKEJA HQ:

8, Mobolaji Bank Anthony Way, by Unity B/S, Ikeja.
EMAIL: guestrelations@afriglobalmedicare.com

IKEJA ANNEX CENTRE:

71, Mobolaji Bank Anthony Way, by Olowu Street, Ikeja.
EMAIL: guestrelations@afriglobalmedicare.com

IPAJA CENTRE:

210, Ipaja Road, Opposite St. Andrews Anglican Church, Akinyele, Ipaja, Lagos.
EMAIL: ipaja@afriglobalmedicare.com

EGBEDA CENTRE:

3/4, Inside The Lord's Mercy Plaza, Oja Bus Stop, Egbeda, Lagos.
EMAIL: report_egb@afriglobalmedicare.com

OGBA CENTRE:

15A, Thomas Salako Street, By Ogba Bus Stop, Ogba
EMAIL: ogba@afriglobalmedicare.com

IGBOBI CENTRE:

Amenity Building, Igboibi.
120/124 Ikorodu Road, Lagos State.
EMAIL: report_igboibi@afriglobalmedicare.com

IKORODU CENTRE:

76 Beach Road, Opposite Mobile Filling Station, Ikorodu
EMAIL: report_ikd@afriglobalmedicare.com

IGANDO CENTRE:

Km 16 Isheri/ LASU Road, Beside MFM Church, Alhaji Ede B/S, Igando
EMAIL: report_igd@afriglobalmedicare.com

VICTORIA ISLAND (WELLNESS) CENTRE:

Plot 1192A, Kasumu Ekemode Street, Off Bishop Oluwole Street, Victoria Island, Lagos.
Email: report_vi@afriglobalmedicare.com

IJEDA CENTRE:

Opposite St. Raphael Catholic Church, Ijeda, Lagos, Ikorodu.
Email: report_ijede@afriglobalmedicare.com

AML-AHMADIYYA (NAZO HOUSE):

13, Winfunke Olowe Crescent, Off Lagos - Abeokuta Expressway, Ahmadiyya B/S, Ojokoro, Lagos.
EMAIL: report_nazo@afriglobalmedicare.com

ADO-EKITI CENTRE:

Pathology Department of ABUADTH ABUAD Multi-Specialist Hospital km 8.5 Afe Babalola Way, Ado-Ikare Road, Ado Ekiti, Ekiti State.
EMAIL: report_abuad@afriglobalmedicare.com

AML-DELSUTH OGHARA CENTRE:

Pathology Department of DELSUTH Delta State University Teaching Hospital, Oghara-Ajagbadudu Road, Oghara, Delta State.
Email: report_delsuth@afriglobalmedicare.com

IBADAN CENTRE:

Shop 1, Abeo Oloko Shopping Complex, Opposite Weeldrop Filling Station, Gate Bus Stop, Ibadan.

ENDOCRINOLOGY

- ☒ Thyroid Profile
☐ TSH
☐ Total T3
☐ Total T4
☐ Free T4
☐ Free T3
☒ Hormones
☐ LH
☐ FSH
☐ Progesterone
☐ Oestradiol
☐ DHEA - S
☐ Testosterone
☐ Prolactin
☐ Growth Hormone
☐ B HCG Quantitative

MICROBIOLOGY

- ☐ Urine RE
☐ Stool RE
☐ Stool Occult
☐ Semen Analysis
☐ Gram Stain
☐ Zn Stain-sputum (3 days)
☐ Zn Stain
☐ Fungus Studies (Specify)
☐ KOH Mount
☐ Others Specify
☐ T - Spot (TB)
☒ Mantoux Test
☐ M/C/S
 Please specify _____

TUMOR MAKERS

- ☐ Insulin
☐ Cortisol Am/Pm
☒ PSA (Total)
☐ PSA (Free)
☐ Alpha Pheto Protein
☐ CEA
☐ CA 125
☐ CA 15.3 (Breast)
☐ CA 19.9 (Git Pancreas)

MOLECULAR BIOLOGY

- ☐ DNA Paternity Test
☐ Viral Load
☐ HBV PCR
☐ HPV PCR
☐ STI PANEL
DRUG ASSAYS/METABOLITES
☐ Lithium
☐ Valproate
☐ Phenyton
☐ Cocaine Metabolites (Urine)
☐ Drug of Abuse (5panel, 8panel, 10panel)
☐ Alcohol Test

Others(Specify)**RADIOLOGY**

Select body parts and specify details in the space below:

**DIGITAL X-RAY
(ROUTINE)**

- ☐ Chest (PA only)
☐ Chest (PA & LAT)
☐ Lumbo - Sacral
☐ Sternum
☐ Foot

- ☐ Sinuses
☐ Thoracic Spine (AP & LAT)
☐ Cervical Spine (All Views)
☐ Skull (All Views)
☐ Ankle Joint

Others _____

**DIGITAL X-RAY
(SPECIAL)**

- ☐ Hysterosalpingography (HSG)
☐ Barium Meal & Follow Through
☐ Loopogram
☐ Barium Swallow
☐ Barium Enema

- ☐ Barium Meal
☐ MCUG/RUCG
☐ Intravenous Urography (IVU)
☐ Fistulogram
☐ Cysto Urethrogram

Others _____

ULTRASOUND

- ☐ Renal Biopsy Under USS
☐ Ultrasound Head (Transfontanelle)
☐ Ultrasound Neck
☐ Ultrasound Soft Tissue
☐ Ultrasound Thyroid
☐ Ultrasound Chest
☐ Ultrasound Breast
☐ Ultrasound 3rd Trimester

- ☐ Ultrasound Abdomen
☐ Ultrasound Abdomen & Pelvis
☐ Ultrasound KUB
☐ Ultrasound 1st Trimester
☐ Ultrasound GYN/OBG
☐ Biophysical Profile
☐ Ultrasound Small Parts
☐ Color Doppler

- ☐ Follicle Monitoring
☐ Ultrasound Pelvis
☐ Ultrasound Testes
☐ Ultrasound Trans Rectal (Prostate)
☐ Musculoskeletal USS
☐ Occular Scan
☐ Transvaginal Scan

CT SCAN

- ☒ CT Brain / Head
☐ CT Brain + Cervical Spine (Trauma)
☐ CT Abdomen
☒ CT Abdomen/Pelvis
☐ CT Chest/Abd/Pelvis
☐ CT Urogram
☐ CT Chest

- ☐ CT Upper Extremities (Specify)
☐ CT Angiography (Specify)
☐ CT Lower Extremities (Specify)
☐ CT IAM/Mastoids/Petrous
☐ CT Orbits
☐ CT Facial Bones
☐ CT PNS (Post Nasal Space)

- ☐ CT Sinuses
☐ CT Thoracic Spine
☐ CT Neck
☐ CT Lumbosacral
☐ CT Guided Biopsy (Soft Tissue)
☐ CT Guided Biopsy (Bone)
☐ CT Thoracolumbar Spine

**ADVANCED
MRI SCAN
(1.5 TESLA)**

- ☐ MRI Thoracic Spine
☐ MRI Cervical Spine
☐ MRI Lumbosacral Spine
☐ MRI Angiography Procedures
☐ MRI Shoulder

- ☐ MRI PNS
☐ MRI Brain
☐ MRI Sella / Pituitary
☐ MRI Lower Extremities (Specify)
☐ MRI Upper Extremities (Specify)

- ☐ MRI Orbits
☐ MRI Pelvis
☐ MRI Hip
☐ MRI Neck
☐ MRI Whole Body
☐ MRI Other studies

CARDIAC TESTS

- ☒ ECG ☐ EEG ☐ Paed. ECG ☐ Stress Test ☐ Echocardiography ☐ Paed. Echo
☐ Ambulatory BP Monitoring ☐ Holter ECG ☐ Spirometry

ENDOSCOPY

- ☐ Gastroscopy ☐ Colonoscopy ☐ Proctosigmoidoscopy ☐ Both Upper + Lower GIT

BREAST IMAGING

- ☐ Mammography ☐ Breast Scan ☐ Ductography

DENTAL SERVICES

Specify _____

EYE SERVICES

Specify _____

We are committed to ensuring the protection of all personal information that we hold and safeguarding the rights of clients to data privacy and protection. We are compliant with the audit filing requirements under the NDPR 2019.