

# MUCOSAL MELANOMAS OF THE HEAD AND NECK

## Histopathology Request Information



Family name

Given name(s)

Date of birth

Date of request

Ethnicity

- Unknown/inadequately described  
 Aboriginal/Torres Strait Islander (AU)  
 Māori (NZ)  
 Other ethnicity:

Patient identifiers

e.g. MRN, IHI or NHI (please indicate which)

Requesting doctor - name and contact details

Copy to doctor  
name and contact details

### OPERATIVE PROCEDURE

- Biopsy (excisional, incisional), *specify*
- Resection, *specify (e.g. maxillectomy, hemiglossectomy, partial laryngectomy, etc.)*
- Neck (lymph node) dissection\*, *specify*
- Other, *specify*

\* *If a neck dissection is submitted, then a separate dataset is used to record the information.*

### PRINCIPAL CLINICIAN

### OTHER COMMENTS