

Clinical Presentation: (use diagram on opposite page)

Location: _____
 Size: _____

- Color:**
 Normal
 White
 Red
 Blue
- Shape:**
 Pedunculated
 Sessile
 Flat
 Ulcerated
- Texture:**
 Smooth
 Granular/Rough
 Papillary
 Pulsatile
- Consistency:**
 Firm
 Soft
 Fluctuant

- Clinical/Social History:** Tobacco
 Alcohol
- Pertinent Medical History:**

Previous OSU Biopsy(ies) Accession #(s)

Procedure: _____ Excisional Biopsy _____ Incisional Biopsy _____ Cytology

Operative Findings/Comments:

Clinical Impression/Diagnosis:

Additional Material(s): Please check if return of these materials is requested: Yes No
 _____ Radiograph (s) _____ Photographs _____ Disc/travel drive/other

Referring Provider's Signature: _____
Date of Procedure: ____/____/____

