

MRI override request form

Please complete the attached form for requests for tests which have been automatically rejected based on the minimum repeat interval timeframe.

Please ensure you add a reason why this test is indicated on the below form. The information provided will be audited and reviewed by the senior laboratory team and the request may still be rejected.

Tests can not usually be reinstated if the sample is more than 24 hours old and can only be reinstated if there is sufficient volume.

All details to be completed.

Patient's name: **DoB:**

Patient NHS/Hosp No:

Ward/Hospital:

Requested by: (print and sign)

Original date of sample:

Sample number (if known):

Today's date:

Test to be re-instated:

Reasoning for requiring repeat test within minimum intervals: