

Referring Vet: **SAMPLE** Copy Doctor: **00VETDIA VETDIAGNOSTIX** Insurance: **VDX VETDIAGNOSTIX**

**Veterinarian Details** **Animal Details**

Address: \_\_\_\_\_ Telephone No.: \_\_\_\_\_ File Number: \_\_\_\_\_

Fasting:  Random:  Routine:  Urgent:

Telephone/Fax: \_\_\_\_\_

Collection Date: DD MM YYYY Time: HOUR MIN

Venesectionist: \_\_\_\_\_ Submitted:

Owner Surname: \_\_\_\_\_ Pet Name: \_\_\_\_\_ Age: \_\_\_\_\_ Gender:  F  M

Pet Breed: \_\_\_\_\_

Avian:  Bovine:  Canine:  Caprine:  Equine:  Exotic:

Feline:  Ovine:  Porcine:  Poultry:  Wildlife:  Other:

Telephone No. (H): \_\_\_\_\_ (W): \_\_\_\_\_

Spec. Taken: **SST** ( ) **CLOT** (No SST) ( ) **CIT** ( ) **SPUT** ( ) **EDTA** ( ) **PINK** (EDTA) ( ) **FAEC** ( ) **FLUORIDE** ( ) **HEP** ( ) **SWAB** ( ) **URINE** ( ) **24hr U** ( ) **OTHER:** \_\_\_\_\_

Spec. Received: **SST** ( ) **CLOT** (No SST) ( ) **CIT** ( ) **SPUT** ( ) **EDTA** ( ) **PINK** (EDTA) ( ) **FAEC** ( ) **FLUORIDE** ( ) **HEP** ( ) **SWAB** ( ) **URINE** ( ) **24hr U** ( ) **OTHER:** \_\_\_\_\_

ICD10 Codes: \_\_\_\_\_ Clinical Information: \_\_\_\_\_ Other Tests: \_\_\_\_\_

MRI# \_\_\_\_\_

Microbiology	Milk laboratory	Toxicology
<b>PUS, swabs, tissues &amp; aspirates</b>	<b>Herd mastitis packages</b>	<b>PCR large animal</b>
Source: _____	V4290 <input type="checkbox"/> Composite (SCC+culture)	V4290 <input type="checkbox"/> Pesticides
V4290 <input type="checkbox"/> Microscopy	V4290 <input type="checkbox"/> Mastitis antibiogram	V4290 <input type="checkbox"/> Alkaloids
V4290 <input type="checkbox"/> Culture & sensitivity	V4290 <input type="checkbox"/> SCC only	V4290 <input type="checkbox"/> Heavy metals
<b>Blood culture</b>	V4290 <input type="checkbox"/> Culture based on target SCC	V4290 <input type="checkbox"/> Mineral analysis liver
V4290 <input type="checkbox"/> Microscopy, culture & sensitivity	V4290 <input type="checkbox"/> Quarter samples	V4290 <input type="checkbox"/> Mineral analysis blood
<b>ENT specimens</b>	<b>Bulk tank packages</b>	Other: Specify _____
Source: _____	V4290 <input type="checkbox"/> Herd bulk tank (bacterial counts & SCC)	V4290 <input type="checkbox"/> BVDV
V4290 <input type="checkbox"/> Microscopy	V4290 <input type="checkbox"/> Herd bulk tank & milk composition	V4290 <input type="checkbox"/> Bovine herpes virus
V4290 <input type="checkbox"/> Culture & sensitivity	V4290 <input type="checkbox"/> Bulk tank - own profile	V4290 <input type="checkbox"/> MCF Wildebeest
<b>Urine analysis</b>	<b>Milk composition</b>	V4290 <input type="checkbox"/> MCF Sheep
V4290 <input type="checkbox"/> SG & dipstick	V4290 <input type="checkbox"/> Standard composition profile	V4290 <input type="checkbox"/> Mycoplasma bovis
V4290 <input type="checkbox"/> Microscopy (cell count & casts)	V4290 <input type="checkbox"/> Own profile	V4290 <input type="checkbox"/> African horse sickness
V4290 <input type="checkbox"/> Culture & sensitivity	<b>Parlour hygiene</b>	V4290 <input type="checkbox"/> Equine encephalosis
<b>Faecal analysis</b>	V4290 <input type="checkbox"/> Surface swab profile	V4290 <input type="checkbox"/> Equine neuro panel
V4290 <input type="checkbox"/> Microscopy (wet prep & cryptosporidia)	V4290 <input type="checkbox"/> Hand swab profile	Other: Specify _____
V4290 <input type="checkbox"/> Culture & sensitivity	V4290 <input type="checkbox"/> Water analysis	<b>PCR companion animal</b>
V4290 <input type="checkbox"/> Rota virus	<b>Fertility</b>	V4290 <input type="checkbox"/> Ehrlichia canis
<b>Fungal analysis</b>	<b>Preputial fluid PCR</b>	V4290 <input type="checkbox"/> Canine distemper
V4290 <input type="checkbox"/> Microscopy	<input type="checkbox"/> Trich <input type="checkbox"/> Campy	V4290 <input type="checkbox"/> MDR gene
V4290 <input type="checkbox"/> Culture	<b>Preputial fluid culture</b>	V4290 <input type="checkbox"/> Feline leukemia virus
<b>CSF analysis</b>	<input type="checkbox"/> Trich <input type="checkbox"/> Campy	V4290 <input type="checkbox"/> FIV
V4290 <input type="checkbox"/> Total nucleated cellcount, total protein. Cytology for slide evaluation	V4290 <input type="checkbox"/> Semen evaluation & bacteriology	V4290 <input type="checkbox"/> FIP
V4290 <input type="checkbox"/> Culture & sensitivity	V4290 <input type="checkbox"/> Semen evaluation only	V4290 <input type="checkbox"/> Chlamydia
<b>Other</b>	<b>Parasitology</b>	V4290 <input type="checkbox"/> PBF
V4290 <input type="checkbox"/> Full faecal screen - small animal	<b>Production animal</b>	V4290 <input type="checkbox"/> Polyomavirus
V4290 <input type="checkbox"/> Full faecal screen - large animal	V4290 <input type="checkbox"/> Full flotation panel	V4290 <input type="checkbox"/> Pigeon circovirus
V4290 <input type="checkbox"/> Clostridial fat	V4290 <input type="checkbox"/> Short flotation panel	Other: Specify _____
<b>NEB profiling</b>	V4290 <input type="checkbox"/> Liver fluke Ag panel	<b>Canine serology</b>
V4290 <input type="checkbox"/> NEFA pre-calving	V4290 <input type="checkbox"/> Larval culture & ID	<b>Antibody</b>
V4290 <input type="checkbox"/> NEFA post-calving	<b>Companion animal</b>	V4290 <input type="checkbox"/> Canine distemper IgM / IgG
V4290 <input type="checkbox"/> BHB post-calving	V4290 <input type="checkbox"/> WEC	V4290 <input type="checkbox"/> Ehrlichia canis IgM / IgG
V4290 <input type="checkbox"/> Urea pre-calving	V4290 <input type="checkbox"/> Parasite ID	Other: Specify _____
V4290 <input type="checkbox"/> Urea post-calving	V4290 <input type="checkbox"/> Microfilaria knots	<b>Antigen</b>
<b>Allergy</b>	V4290 <input type="checkbox"/> Microfilaria ID	V4290 <input type="checkbox"/> Canine distemper
V4290 <input type="checkbox"/> Allercept serology dog / cat	<b>Feline serology</b>	V4290 <input type="checkbox"/> Canine parvovirus
V4290 <input type="checkbox"/> Allercept serology equine	<b>Antibody</b>	<b>Livestock serology</b>
V4290 <input type="checkbox"/> ASIT vaccine	V4290 <input type="checkbox"/> FIV	<b>Antibody</b>
<b>Equine serology</b>	V4290 <input type="checkbox"/> FIP	V4290 <input type="checkbox"/> EBL
<b>Antibody</b>	Other: Specify _____	V4290 <input type="checkbox"/> BVD
V4290 <input type="checkbox"/> AHS	<b>Antigen</b>	V4290 <input type="checkbox"/> IBR
V4290 <input type="checkbox"/> EE	V4290 <input type="checkbox"/> Feline leukemia	Other: Specify _____
V4290 <input type="checkbox"/> EHV		<b>Antigen</b>
V4290 <input type="checkbox"/> WNV		V4290 <input type="checkbox"/> BVD antigen
Other: Specify _____		