

# Companion Animal Submission Form

Veterinarian:
Practice:
Owner:
Owner Address:
Clinic Reference:
Species: <input type="checkbox"/> Canine <input type="checkbox"/> Feline <input type="checkbox"/> Avian <input type="checkbox"/> Reptile <input type="checkbox"/> Other:
Breed:

FORM ID: LAB USE ONLY  
DO NOT COVER

Date Sample Collected:
Animal Name / ID:
Age:                      year(s)                      month(s)
Sex:

### Diagnostic Panels Panel breakdown on reverse

Comprehensive Sick & CBC	<input checked="" type="checkbox"/>
Comprehensive Sick & SAA	<input checked="" type="checkbox"/>
Comprehensive Sick (Biochem only)	<input checked="" type="checkbox"/>
Pre-Op/Health Check	<input checked="" type="checkbox"/>
NSAID Panel	<input checked="" type="checkbox"/>
Elderly Thin Cat Panel	<input checked="" type="checkbox"/>
Acute Abdominal Panel	<input checked="" type="checkbox"/>
Liver Panel	<input checked="" type="checkbox"/>
Renal Extended Panel	<input checked="" type="checkbox"/>
Renal Check Up Panel	<input checked="" type="checkbox"/>
PU/PD Panel	<input checked="" type="checkbox"/>
Seizure Control	<input checked="" type="checkbox"/>
Chronic Diarrhoea Panel	<input checked="" type="checkbox"/>
Diabetes Mellitus Check	<input checked="" type="checkbox"/>
Canine Addison's Check	<input checked="" type="checkbox"/>

### Biochemistry

Albumin	<input checked="" type="checkbox"/>
ALT	<input checked="" type="checkbox"/>
ALP	<input checked="" type="checkbox"/>
Amylase (Canine)	<input checked="" type="checkbox"/>
AST	<input checked="" type="checkbox"/>
Bicarbonate	<input checked="" type="checkbox"/>
Bile Acids	<input checked="" type="checkbox"/>
Bilirubin	<input checked="" type="checkbox"/>
B12/Folate	<input checked="" type="checkbox"/>
Calcium Ionised (Refer to Price Guide)	<input checked="" type="checkbox"/>
Calcium Total	<input checked="" type="checkbox"/>
Chloride	<input checked="" type="checkbox"/>
Cholesterol	<input checked="" type="checkbox"/>
CK	<input checked="" type="checkbox"/>
Creatinine	<input checked="" type="checkbox"/>
Electrophoresis	<input checked="" type="checkbox"/>
Fructosamine	<input checked="" type="checkbox"/>
Globulin	<input checked="" type="checkbox"/>
Glucose (Fl. ox)	<input type="checkbox"/>
Lipase	<input checked="" type="checkbox"/>
Pancreatic Specific Lipase	<input checked="" type="checkbox"/>
Phosphate	<input checked="" type="checkbox"/>
Potassium	<input checked="" type="checkbox"/>
SDMA	<input checked="" type="checkbox"/>
Sodium	<input checked="" type="checkbox"/>
Total Protein (TP)	<input checked="" type="checkbox"/>
TLI	<input checked="" type="checkbox"/>
Triglycerides	<input checked="" type="checkbox"/>
Urea	<input checked="" type="checkbox"/>

### Therapeutics

Phenobarbitone	<input checked="" type="checkbox"/>
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### Theriogenology

Progesterone	<input checked="" type="checkbox"/>
Relaxin (from 28 days)	<input checked="" type="checkbox"/>
Testosterone	<input checked="" type="checkbox"/>
Vaginal Smear	<input type="checkbox"/> <small>slide</small>

Previous Case No:

Clinical Particulars (the more information provided helps the diagnosis):

### Haematology

CBC	<input checked="" type="checkbox"/>
ABC	<input checked="" type="checkbox"/>
Blood Group	<input checked="" type="checkbox"/>
Buffy Coat (Mast Cells)	<input checked="" type="checkbox"/>
Cross Match	<input checked="" type="checkbox"/>
Platelet Count	<input checked="" type="checkbox"/>
Coagulation Profile (Citrate)	<input checked="" type="checkbox"/>
PT (Citrate)	<input checked="" type="checkbox"/>
Blood Smear Exam *	<input checked="" type="checkbox"/>
WBC, Diff & Smear Exam *	<input checked="" type="checkbox"/>

\* Please include a copy of in-clinic analyser results and a fresh unstained smear to aid with interpretation of smear exams

### Serology/Virology

Canine Parvovirus Ab Titre	<input checked="" type="checkbox"/>
FeLV Ag/FIV Ab	<input checked="" type="checkbox"/>
Feline Corona Virus/FIP Ab	<input checked="" type="checkbox"/>
Leptospira MAT (Indicate Serovar)	<input checked="" type="checkbox"/>
Leptospira IgM (Acute)	<input checked="" type="checkbox"/>
Neospora Ab	<input checked="" type="checkbox"/>
Parvovirus Ag	<input checked="" type="checkbox"/> <small>faeces</small>
Toxoplasma Ab LAT	<input checked="" type="checkbox"/>

### Endocrinology

ACTH Stimulation	<input checked="" type="checkbox"/>
Cortisol (Single)	<input checked="" type="checkbox"/>
Cortisol/Creat Ratio (Urine)	<input checked="" type="checkbox"/>
HDDST	<input checked="" type="checkbox"/>
LDDST	<input checked="" type="checkbox"/>
TSH (Endogenous)	<input checked="" type="checkbox"/>
T4 (Total Thyroxine)	<input checked="" type="checkbox"/>

### Cytology

Smear Cytology Site(s):	
Fluid Analysis Site(s):	<input checked="" type="checkbox"/>

### Pathology

CNS Evaluation	<input type="checkbox"/> <small>fixed</small>
Histology Single Tissue	<input type="checkbox"/> <small>fixed</small>
Histology Multiple Tissues	<input type="checkbox"/> <small>fixed</small>
Necropsy	<input type="checkbox"/> <small>fresh</small>
Tumour Reassessment	<input type="checkbox"/> <small>fixed</small>

### PCR

Feline Respiratory PCR Panel	} <small>swab</small>
Feline Herpesvirus	
Feline Calicivirus	
Feline Chlamydia	
Feline Chlamydia	} <small>swab</small>
Feline Coronavirus	
FeLV PCR	<input checked="" type="checkbox"/>
FIV PCR	<input checked="" type="checkbox"/>
Leptospira PCR	<input checked="" type="checkbox"/>
Mycoplasma felis	<input checked="" type="checkbox"/>
Mycoplasma haemofelis	<input checked="" type="checkbox"/>
Ringworm PCR (M. canis)	<input type="checkbox"/> <small>hair</small>
Trichomonas foetus	<input type="checkbox"/> <small>faeces</small>

### Microbiology Panel breakdown on reverse

Aerobic Culture	
Aerobic Culture & Sensitivity	
Anaerobic Culture	
Blood Culture	
Ear Swab Culture + Sensitivity	<small>swab</small>
KOH Only	<small>hair</small>
Mycology Culture	<small>hair</small>
Mycology Culture with KOH	<small>hair</small>
Faecal Occult Blood	<small>faeces</small>
Gastro-Intestinal Panel	<small>faeces</small>
Campylobacter	<small>faeces</small>
Salmonella	<small>faeces</small>
Yersinia	<small>faeces</small>

### Urinalysis

Full (Dipstick, SG & Sediment)	<input checked="" type="checkbox"/>
Culture & Sensitivity	<input checked="" type="checkbox"/>
Protein: Creatinine Ratio	<input checked="" type="checkbox"/>
Sediment & SG	<input checked="" type="checkbox"/>

### Method of Urine Collection

Cysto
Catheter
Freeflow
Other

### Parasitology Panel breakdown on reverse

Companion Parasitology Panel
Ectoparasites
FEC + Coccidia
Giardia/Cryptosporidium
Parasite ID

### Toxicology

Lead	<input checked="" type="checkbox"/>
Avian/Reptilian	
Full Panel	<input checked="" type="checkbox"/>
Mini Panel	<input checked="" type="checkbox"/>
Bile Acids	<input checked="" type="checkbox"/>
CBC	<input checked="" type="checkbox"/> <small>smear +</small>
Faecal Gram Stain	<input type="checkbox"/> <small>faeces</small>
Lead	<input checked="" type="checkbox"/>
Uric Acid	<input checked="" type="checkbox"/>
White Cell Estimation & Smear Exam	<input type="checkbox"/> <small>smear</small>
Zinc	<input type="checkbox"/> <small>liver or serum</small>

### Avian PCR

Chlamydia Screening	<input type="checkbox"/> <small>swab</small>
Malaria Screening	<input checked="" type="checkbox"/>
PBFD	<input type="checkbox"/> <small>feather</small>
Sex Determination	<input type="checkbox"/> <small>feather</small>

### Other Tests/Instruction

### Containers Received (circle)

	Small	Medium	Large
Sent			
Recd			
Samples Submitted			
			Heparin (Green Top) <input checked="" type="checkbox"/>
			Fl. ox (Grey Top) <input type="checkbox"/>
			Serum (Red Top) <input checked="" type="checkbox"/>
			EDTA (Purple Top) <input checked="" type="checkbox"/>
			Slide <input type="checkbox"/>
			Citrate (Blue Top) <input checked="" type="checkbox"/>
			Fluid (Red Top) <input type="checkbox"/>
			Fluid (Purple Top) <input type="checkbox"/>
			Swab <input type="checkbox"/>
			Urine <input checked="" type="checkbox"/>
			Faeces <input type="checkbox"/>
			Fresh Tissue <input type="checkbox"/>
			Fixed Tissue <input type="checkbox"/>
			Hair <input type="checkbox"/>
			Other: <input type="checkbox"/>

# Companion Animal Panel Breakdown (**Panels MUST be requested on front page**)

## Canine Diagnostic Panels:

**Comprehensive Panel:** TP, Alb, Glob, Urea, Creat, ALP, ALT, AST, CK, TBil, Bicarb, Anion Gap, Cholesterol, Amylase, Lipase, Ca, PO4, Na, Cl, K

**Pre-Op/Health Check:** TP, Alb, Glob, Urea, Creat, ALP, ALT, Na, K, Cl, Ca, PO4

**NSAID Panel:** Urea, Creat, ALP, ALT, AST

**Acute Abdominal Panel:** TP, Alb, Glob, Urea, Creat, ALP, ALT, TBil, Bicarb, Amylase, Lipase, Ca, Na, Cl, K

**Liver Panel:** TP, Alb, Glob, Urea, ALP, ALT, AST, Bile Acids, TBil, Chol

**Renal Extended Panel:** Alb, Urea, Creat, Bicarb, Ca, PO4, Na, Cl, K

**Renal Check-up Panel:** Alb, Urea, Creat, Ca, PO4

**PU/PD Panel:** TP, Alb, Glob, Urea, Creat, ALP, ALT, Bicarb Cholesterol, Ca, PO4, Na, Cl, K

**Seizure Control Panel:** ALP, ALT, Cholesterol, Phenobarbitone, Triglycerides

**Chronic Diarrhoea:** TP, Alb, Glob, Bicarb, Cholesterol, Vit B12

**Diabetes Mellitus Check:** ALP, ALT, AST, Fructosamine, Ketones (BOHB), Cholesterol, Triglycerides, Na, Cl, K

**Addison's Check:** Urea, Creat, Na, Cl, K

## Feline Diagnostic Panels:

**Comprehensive Panel:** TP, Alb, Glob, Urea, Creat, ALP, ALT, AST, CK, TBil, Bicarb, Anion Gap, Cholesterol, Ca, PO4, Na, Cl, K, Lipase

**Pre-Op/Health Check:** TP, Alb, Glob, Urea, Creat, ALP, ALT, Na, K, PO4, Ca, Cl

**NSAID Panel:** Urea, Creat, ALP, ALT, AST

**Elderly Thin Cat Panel:** TP, Alb, Glob, Urea, Creat, ALP, ALT, Thyroxine

**Acute Abdominal Panel:** TP, Alb, Glob, Urea, Creat, ALP, ALT, AST, Bicarb, Ca, Na, Cl, K, TBil, Lipase

**Liver Panel:** TP, Alb, Glob, Urea, ALP, ALT, AST, TBil, GGT, Bile Acids, Cholesterol

**Renal Extended Panel:** Alb, Urea, Creat, Bicarb, Anion Gap, Ca, PO4, Na, Cl, K

**Renal Check-up Panel:** Alb, Urea, Creat, Ca, PO4

**PU/PD Panel:** TP, Alb, Glob, Urea, Creat, ALP, ALT, Fructosamine, PO4, T4

**Seizure Control Panel:** ALP, ALT, Cholesterol, Triglycerides, Phenobarbitone

**Chronic Diarrhoea Panel:** TP, Alb, Glob, Cholesterol, Vit B12

**Diabetes Mellitus Check:** ALP, ALT, AST, Fructosamine, Ketones (BOHB), Cholesterol, Triglycerides, Na, Cl, K

## PCR Panels:

**Feline Respiratory PCR Panel:** Herpes, Calici, Chlamydia

## Haematology:

**CBC:** Complete Blood Count (WBC, Full Diff, RBC, Hb, HCT, Platelets, Smear exam)

**ABC:** Automated Blood Count (WBC, RBC, Hb, HCT, No Diff)

**Coagulation Profile:** PT, APTT, Platelets, Fibrinogen

\* Please include a fresh smear

## Avian and Reptilian Panels:

**Full:** CK, AST, TP, PO4, Ca, Glucose, Uric Acid, Bile Acids

**Mini:** CK, AST, TP, GLDH, Ca, Uric Acid

**CBC:** WBC, Hb, HCT, FIB, Diff, Smear Exam

## Microbiology Panels:

**Canine Gastro-Intestinal Panel:** Salmonella, Campylobacter, FEC/Cocc, Giardia/Crypto

**Feline Gastro-Intestinal Panel:** Salmonella, Campylobacter, T.fetus, FEC/Cocc, Giardia/Crypto

## Parasitology Panels:

**Companion Animal Para Panel:** FEC/Cocc, Giardia/Crypto

## Skin Biopsy Cases

**Lesion Distribution**  
Please indicate distribution of lesions by shading affected areas  
Indicate biopsy sites with an "X"

Type of Lesions (please circle)

Primary							
Tumor	Papule	Plaque	Patch	Wheal	Bulla	Pustule	Nodule
Secondary							
Scale	Erosion	Crust	Ulcer	Abscess	Erythema		
Alopecia	Hypopigmentation	Hyperpigmentation					

## Skin Biopsy Cases (*please circle*):

How long has the skin disease been present? Days Weeks Months Years

Treated within the last 2 wks with a veterinary flea product? Yes / No

Treated within the last 3 wks with steroids? Yes / No

Is the animal pruritic? Yes / No

Treated with antibiotics? Yes / No

If treated with Antibiotics, complete the following:

Antibiotic: \_\_\_\_\_

Dose Rate: \_\_\_\_\_



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