

# 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 (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 checked="" 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"/>
----------------	-------------------------------------

**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"/> <small>smear +</small>
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):	<input checked="" type="checkbox"/>
Fluid Analysis Site(s):	<input checked="" type="checkbox"/>

**Pathology**

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

**PCR**

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

**Microbiology** Panel breakdown on reverse

Aerobic Culture	<input checked="" type="checkbox"/>
Aerobic Culture & Sensitivity	<input checked="" type="checkbox"/>
Anaerobic Culture	<input checked="" type="checkbox"/>
Blood Culture	<input checked="" type="checkbox"/>
Ear Swab Culture + Sensitivity	<input checked="" type="checkbox"/> <small>swab</small>
KOH Only	<input checked="" type="checkbox"/> <small>hair</small>
Mycology Culture	<input checked="" type="checkbox"/> <small>hair</small>
Mycology Culture with KOH	<input checked="" type="checkbox"/> <small>hair</small>
Faecal Occult Blood	<input checked="" type="checkbox"/> <small>faeces</small>
Gastro-Intestinal Panel	<input checked="" type="checkbox"/> <small>faeces</small>
Campylobacter	<input checked="" type="checkbox"/> <small>faeces</small>
Salmonella	<input checked="" type="checkbox"/> <small>faeces</small>
Yersinia	<input checked="" type="checkbox"/> <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	<input checked="" type="checkbox"/>
Catheter	<input checked="" type="checkbox"/>
Freeflow	<input checked="" type="checkbox"/>
Other	<input checked="" type="checkbox"/>

**Parasitology** Panel breakdown on reverse

Companion Parasitology Panel	<input checked="" type="checkbox"/>
Ectoparasites	<input checked="" type="checkbox"/>
FEC + Coccidia	<input checked="" type="checkbox"/>
Giardia/Cryptosporidium	<input checked="" type="checkbox"/>
Parasite ID	<input checked="" type="checkbox"/>

**Toxicology**

Lead	<input checked="" type="checkbox"/>
<b>Avian/Reptilian</b>	
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 checked="" type="checkbox"/> <small>faeces</small>
Lead	<input checked="" type="checkbox"/>
Uric Acid	<input checked="" type="checkbox"/>
White Cell Estimation & Smear Exam	<input checked="" type="checkbox"/> <small>smear</small>
Zinc	<input checked="" type="checkbox"/> <small>liver or serum</small>

**Avian PCR**

Chlamydia Screening	<input checked="" type="checkbox"/> <small>swab</small>
Malaria Screening	<input checked="" type="checkbox"/>
PBFD	<input checked="" type="checkbox"/> <small>feather</small>
Sex Determination	<input checked="" 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 checked="" type="checkbox"/>
				Serum (Red Top) <input checked="" type="checkbox"/>
				EDTA (Purple Top) <input checked="" type="checkbox"/>
				Slide <input checked="" type="checkbox"/>
				Citrate (Blue Top) <input checked="" type="checkbox"/>
				Fluid (Red Top) <input checked="" type="checkbox"/>
				Fluid (Purple Top) <input checked="" type="checkbox"/>
				Swab <input checked="" type="checkbox"/>
				Urine <input checked="" type="checkbox"/>
				Faeces <input checked="" type="checkbox"/>
				Fresh Tissue <input checked="" type="checkbox"/>
				Fixed Tissue <input checked="" type="checkbox"/>
				Hair <input checked="" type="checkbox"/>
				Other: <input checked="" 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

Our Terms of Trade can be found at:

<https://www.svslabs.nz/svs-laboratories-home-services-27/terms-of-trade/>



[www.svslabs.nz](http://www.svslabs.nz)

### 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"

**Ventral**

**Dorsal**

**Type of Lesions (please circle)**

<b>Primary</b>							
Tumor	Papule	Plaque	Patch	Wheal	Bulla	Pustule	Nodule
<b>Secondary</b>							
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: \_\_\_\_\_

524 Te Rapa Road  
PO Box 10304  
Hamilton 3241  
New Zealand

t 0800 787 522

07 444 5101

f 07 444 5102