CLEAR SUBMISSION PRINT

CP

☐ **STAT**
(may incur additional charges)

Previous Case# _____

VETERINARY DIAGNOSTIC LABORATORY
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Website: https://vdl.vetmed.illinois.edu/

CLINICAL PATHOLOGY • ENDOCRINOLOGY

Accession # Lab Use Only

CLIENT INFORMATION Account # _____
Clinic/Hospital _____
Referring Veterinarian _____
Address _____
City, State, Zip _____
Phone _____
Email _____
FEIN # _____
☐ New Client ☐ Account Updates

ANIMAL INFORMATION
Breed _____ Age _____
Sex ☐M ☐F ☐FS ☐MC
Weight _____ ☐LB ☐KG ☐G
Species ☐Canine ☐Feline ☐Equine ☐Bovine ☐Porcine ☐Caprine ☐Ovine ☐Avian ☐Other _____
Animal ID _____
See reverse for more IDs

OWNER INFORMATION
Owner Name _____
City, State, Zip _____

SPECIMEN INFORMATION **DATE COLLECTED** _____
Type ☐Serum ☐EDTA ☐Heparin ☐Sodium Citrate ☐Urine (Method)_____ ☐Other _____

HEMATOLOGY
- ☐ CBC
- ☐ Platelet Count
- ☐ Avian/Reptile CBC
- ☐ Reticulocyte count
- ☐ Coombs Test
- ☐ Crossmatch

PANELS
- ☐ IMHA Panel (Ca or Fe) - *CBC, Coombs, Retic*
- ☐ Chemistry Panel (Small Animal) - *Creatinine, BUN, TP, Albumin, Ca, Phos, Na, K, Cl, HCO3, Cholesterol, Triglycerides, ALP, CALP (canine only), ALT, Glucose, GGT, T Bili , CK*
- ☐ Chemistry Panel (Large Animal) - *Creatinine, BUN, TP, Albumin, Mg, Ca, Phos, Na, K, Cl, HCO3, CK, AST, ALP, Glucose, GLDH, GGT, T Bili, Cholesterol, Triglyceride*
- ☐ Chemistry Panel (Avian/Reptile)- *CK, AST, Albumin, Phos, Glucose, Ca, GLDH*
- ☐ Electrolyte Panel - *Na, K, Cl, Albumin, Ca, Phos, HCO3*
- ☐ Fluid Panel - *Creatinine, K, Triglycerides, Cholesterol, T Bili, Glucose*
- ☐ Liver Panel (Small Animal) - *ALT, ALP, CALP (canine only), GGT, T Bili, BUN, Glucose, Albumin, Cholesterol*
- ☐ Liver Panel (Large Animal) - *GLDH, AST, ALP, GGT, T Bili, Albumin, Cholesterol, Triglyceride*
- ☐ Presurgical Panel - *Creatinine, BUN, TP, Alb, Glucose, ALP, ALT*
- ☐ Renal Panel - *Creatinine, BUN, TP, Albumin, Ca, Phos, Na, K, Cl, HCO3, Glucose, Cholesterol*

OTHER CHEMISTRY TESTS
- ☐ GLDH
- ☐ Bile Acids
  - ☐ Pre
  - ☐ Post
- ☐ CALP (canine) - *CALP & ALP*
- ☐ CALP Isoenzyme Profile (canine) - *CALP, ALP, Bone & Liver Fractions*
- ☐ Fructosamine
- ☐ Magnesium
- ☐ Other _____

Note: Any test listed on Chem Profile can be requested as a single test

URINE/FLUID CHEMISTRY
- ☐ Electrolytes - *Na, K, Cl*
- ☐ Electrolyte Clearance - *Ca, P, Na, K, Cl, Creatinine Urine and serum required*
- ☐ Calcium
- ☐ Creatinine
- ☐ Phosphorus
- ☐ Protein
- ☐ Protein: Creatinine Ratio
- ☐ Triglyceride
- ☐ T. Bilirubin
- ☐ Urinalysis

Collection Method _____

HEMOSTASIS *(Requires Sodium Citrate)*
- ☐ PT ☐ PTT
- ☐ Fibrinogen ☐ FDP (canine)

- ☐ Coag Panel - *(requires Na Cit) PT, PTT, Fib*
- ☐ Coag Panel w/FDP (canine)-*(requires Na Cit) PT, PTT, Fib,FDP*

CYTOLOGY/FLUID ANALYSIS
(PROVIDE HISTORY ON REVERSE)
- ☐ Cytology
  - Source _____
- ☐ Bone Marrow
- ☐ Smear Exam for Parasites
- ☐ Fluid Analysis -*Cell Count, Cytology, T Protein, Specific Gravity*
  - Source _____
- ☐ BAL
- ☐ Tracheal Wash
- ☐ Urine (cytology only)
- ☐ Alkaline Phosphatase Stain—**If Indicated**

ENDOCRINE AND PHARMACOLOGY
Cortisol (canine and feline)
- ☐ ACTH Stim
- ☐ Cortisol
- ☐ HDDS
- ☐ LDDS

- ☐ Progesterone (canine)
- ☐ T4 (canine and feline)
- ☐ TSH (canine)
- ☐ Thyroid Profile (canine) - *T4, TSH*
- ☐ Bromide
- ☐ Phenobarbital

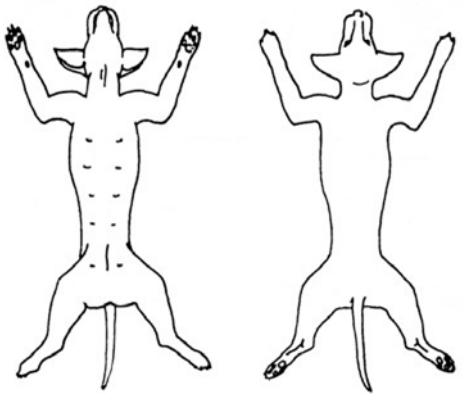
OTHER TESTING
- ☐ Canine Snap ® 4DX Plus Panel
  includes: E. canis, Lyme disease, A. phagocytophilum, A. platys and Dirofilaia immitis
- ☐ Feline Pancreatic Lipase-Snap Test (FPL)
- ☐ Canine Pancreatic Lipase-Snap Test (CPL)
- ☐ C-Reactive Protein
- ☐ Other Tests _____

Authorized Signature (Optional) _____ VDL-Received By (Initials)

CLINICAL PATHOLOGY • ENDOCRINOLOGY (PAGE 2)

HISTORY OR ADDITIONAL INFORMATION: *Indicate signs, duration, stress factors, previous disease, treatments, post-mortem findings, pertinent feed or feed activities, time period animal was on premises, and clinical lab results (attach additional sheets as necessary).*

R ***L*** ***L*** ***R***



Show distribution of skin lesions in the above drawing

_____ *TOTAL NUMBER OF SAMPLES*

ACCESSION # _____

MULTILPE SPECIMEN INDENTIFICATION

NO	*Specimen ID*
1	
2	
3	
4	

NO.	*Specimen ID*
5	
6	
7	
8	

Attach Additional Sheets as Necessary

SPECIAL INSTRUCTIONS:

VDL- Received By (Initials) _____