



SAMPLES TAKEN Date: ____/____/____ (yyyy/mm/dd) Time of day ____:____ Date sent ____/____/____ (yyyy/mm/dd)

SUBMITTED BY ☐ Veterinarian ☐ Owner ☐ OtherBILL ☐ Veterinarian ☐ Other

Important. Please read. Contact Information must be supplied with all samples submitted for testing to the Animal Health Lab ("AHL"). Agricultural animal testing carried out through AHL is subsidized by the Government of Ontario. By submitting samples for testing to AHL, the submitter acknowledges that s/he is the owner or is a duly authorized agent of the owner. The submitter acknowledges and agrees that AHL may share test results and Contact Information as it deems necessary for the purposes of relevant legislation regarding reportable or notifiable diseases and for the purpose of surveillance of animal or public health in Ontario.

Clinic No.	Owner unique ID (max. 40 characters)		
Clinic	Address		
Address	Postal code	Premises ID	Barn postal code
City	Phone	Phone	Email
Veterinarian	Fax	Farm	Fax
Email	Barn/pen/floor/batch ID		

DEMOGRAPHIC INFORMATION IMPORTANT

History (treatments, vaccinations, management, including all current drug therapy)

Species _____	<input type="checkbox"/> Rabies suspect	Case type <input type="checkbox"/> Diagnostic <input type="checkbox"/> Monitoring <input type="checkbox"/> Research <input type="checkbox"/> Other
Breed _____	<input type="checkbox"/> Insurance claim	
Age _____ d w m y	<input type="checkbox"/> Possible litigation	
Sex (circle) F M N mixed	<input type="checkbox"/> Previous case #	

Herd size _____
No. at risk _____
No. sick _____
No. dead _____
Weight _____ kg <input type="checkbox"/> lb <input type="checkbox"/>
Duration of problem: _____ days _____ weeks _____ months _____ years

Special instructions

☐ STAT (additional charges apply)

• The AHL does not accept submissions from non-human primates.

• The AHL does not accept venomous snakes or reptiles, poisonous amphibians or fish for gross or histologic pathology examination.

# SPECIMENS	Sent	Received
Whole blood	_____	_____
Serum	_____	_____
EDTA	_____	_____
Urine	_____	_____
Feces	_____	_____
Fresh tissue	_____	_____
Fixed tissue	_____	_____
Fluid	_____	_____
Scrapings	_____	_____
Slide	_____	_____
Swab	_____	_____
Other	_____	_____

CLINICAL PATHOLOGY

Biochemistry

☐ Profile: _____☐ Avian/reptilian - Vetscan *scana*☐ Creatinine *creat*☐ Cortisol *cort*☐ Electrolyte profile *lyte*☐ Fructosamine *fruc*☐ Haptoglobin *hp*☐ NEFA *nefa*☐ Progesterone *p4*☐ Total T4 *tt4*☐ Other: _____

Coagulation

☐ Fibrinogen *fib*☐ Profile 1 (PT, PTT) *ptpt*☐ Profile 3 (PT, PTT, Fib) *coag3*

Hematology

☐ CBC, food animal *cbcf*☐ CBC, companion animal *cbc*☐ CBC, avian/reptilian *avcbc*☐ Platelet count☐ Reticulocytes

Urinalysis

☐ RoutineType: ☐ free flow ☐ catheterized☐ cystocentesis

Cytology

Site: _____

☐ Cytology smears☐ Cyto. fluids (inc. CSF)☐ Cytology, bone marrow

BACTERIOLOGY

Site: _____

☐ Culture and susceptibility, food☐ Culture and susceptibility, comp.☐ Anaerobic & aerobic☐ Anaerobic culture☐ Chlamydia psittaci - PCR☐ Leptospirosis, food☐ Leptospirosis, comp.☐ Mycology - fungal culture☐ Other: _____

VIROLOGY

☐ Aleutian dis., mink herd - CIE☐ Aleutian dis., mink - PCR☐ BTV/EHDV - PCR (deer)☐ Canine distemper virus - PCR☐ CWD - ELISA☐ Elephant herpesvirus 1-7 - PCR

PARASITOLOGY

☐ Fecal flotation, companion☐ Fecal flotation, wildlife

MYCOPLASMOLOGY

☐ Aeromonas salmonicida PCR☐ Haemoplasma - PCR☐ Mycoplasma culture, cell line☐ Mycoplasma culture, food☐ Mycoplasma culture☐ Ophidiomyces oph. - PCR☐ Serpentinovirus - PCR

(Reptile nidovirus)

☐ Trichomonas gallinae - PCR☐ Pseudo. destructans - PCR

TOXICOLOGY

☐ Anticoagulant screen☐ Lead, blood, companion☐ Lead, blood, food☐ Min. panel, heavy metal

(Sb As Be B Cd Co Cr Cu Fe

Pb Hg Mg Mn Mo Ni Se Sn Ti Zn)

HISTOPATHOLOGY

Additional charges may apply for:

1) Demineralization-bone/other hard

tissues

2) Nail/hof softening

of tissues/biopsies

*t/b=tissues/biopsies

☐ Histopathology (1-2 t/b*)☐ Histopathology (3-6 t/b*)☐ Histopathology (7+ t/b*)☐ Tumor margin evaluation

(biopsy > 2cm)

Lesion location

VIA
☐ Courier
☐ Drop-off
☐ Mail
☐ Other

RECEIVED BY

Any questions? Please contact the lab.

Email: ahlinfo@uoguelph.caWebsite: <http://ahl.uoguelph.ca>

AHL GUELPH: 519-824-4120 ext: 54530, Fax: 519-821-8072

AHL KEMPTVILLE: 613-258-8320, Fax: 613-258-8324

AHL - Guelph Courier Address

UoG Animal Health Lab-PAHL

419 Gordon Street-Bldg 89

Guelph, ON N1G 2W1

Attn: Specimen Reception

Animal Health Laboratory

Laboratory Services Division

79 Shearer Street

Kemptville, Ontario

K0G 1J0

Comments/History (Continued)

[illegible]