



Clinical Pathology Request Form

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LAB USE ONLY

PRACTICE DETAILS:

Clinician:

Email address for results:

ANIMAL DETAILS:

Owner:

Animal Name:

Species:

Breed:

Age:

Sex:

Date of sample:

CLINICAL SUMMARY Presentation, Differential Diagnoses, Recent Treatment

Receiving cytotoxic drugs Y/N Possibility of zoonosis Y/N Travel outside of the UK Y/N If yes, please specify.....

All clinical information and residual samples collected for diagnostic purposes may be retained for teaching and research purposes. All data is anonymised. If you do **NOT** authorise the use of these samples please tick this box

CYTOLOGY (Slides/EDTA fluid)

- Routine cytology
- Fluid analysis (Effusion/CSF/Synovial fluid)

Please specify site(s):

BONE MARROW

- Bone marrow aspirate (inc CBC)
- Bone marrow aspirate and core (inc CBC)

MICROBIOLOGY/PARASITOLOGY

- Bacterial culture and sensitivity

Please specify site(s):

- Faecal parasitology
- Other (please specify):

HAEMATOLOGY (EDTA)

- Complete Blood Count (CBC)
- Blood typing
- Coombs test
- Cross Match

COAGULATION (Citrate)

- Coagulation times (PT/PTT)
- D-Dimers
- TEG

FLOW CYTOMETRY (Aspirates/EDTA)

- Canine lymphoma/leukaemia
- Feline lymphoma/leukaemia

HISTOLOGY

Please specify no. and type of tissues:

BIOCHEMISTRY (Serum/Heparin)

- Basic profile
- Extended profile (includes CRP or SAA and lipase for small animals)
- Bile acids
- Total T4 (feline only)
- Osmolarity (urine/serum/plasma)

URINALYSIS (Plain tube)

- Full urinalysis (includes UPC)

Sampling method:

OTHER INDIVIDUAL TESTS (Please specify):