

## ZooQuatic

Laboratory, LLC 701 East Pratt St. Baltimore, MD 21202 443-887-4071 labservices@zooquaticlab.com ZQ Lab Use Only ZQ Accession: Date Received:

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## **CLINICAL PATHOLOGY SUBMISSION FORM**

Client/Owner Information	
Organization:	Contact Name:
Address:	Preferred Results Reporting (email or fax):
Phone:	Invoicing Contact:
Sample Submission Info	mation
Animal ID/Accession:	Species:
Health Status:	Sex/Age (if known):
Collection Date:	Sample comments:
Sample Type: Hemato	logy Chemistry Fasting status Cytology sample/site
Test(s) Requested	
Hematology: { } CBC { } CBC, estimated WBC { } Buffy coat evaluation { } Other, see notes below	
Chemistry: { } Elasmob	ranch { Avian/Rep/Amphib/Teleost Invert. Mammal Other, see notes
Cytology: Select all that apply: Diff-Quik or WG stain Gram stain Acid Fast stain	
Urinalysis: Free c	atch Cystocentesis Add cytology (DQ/Gram/Acid fast)
Fluid Analysis: { } Fluid	Analysis { } Add cytology (DQ/Gram/Acid fast) { } Gastric Occult
Fecal Analysis: { } Direct/Float { } Fecal Occult { } Cryptosporidium stain { } Other, see notes	
Notes:	