

NORTH CAROLINA VETERINARY DIAGNOSTIC LABORATORY SYSTEM



SURGICAL BIOPSY and CYTOLOGY SUBMISSION FORM

(Not for General Submissions or Avian Submissions)

For Laboratory Use Only

Date received: _____ Time Received: _____ Staff initials: _____ Coolant status: *Frozen* *Cold* *Warm* *None* Number of Samples/Jars: _____
Delivery: *UPS* *FEDEX* *Overnight drop off* Hand delivery (name) _____ Sample condition: *Good* *Broken* *Leaked* *Crushed*
Payment: *Billed* *Paid* (\$ _____)
Receipt # _____ Check # _____ Auth # _____ **For Lab Use Only**

For Lab Use Only

Account #: _____ Bill to _____
Clinic name/company: _____
Veterinarian/contact: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
E-mail: _____
Send results by: Fax Email Mail

Owner: _____

Farm name: _____ Location: _____

Address: _____

City: _____ State: _____ Zip: _____

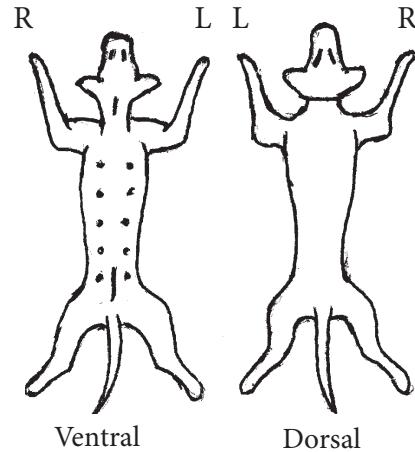
County: _____ Premise ID: _____

Phone (Home): _____ Cell/Work: _____

Fax: _____ Email: _____

Animal ID/Name: _____ Species: _____ Breed: _____ Age: _____ Y M W Sex: M F NM NF
BIOPSY: Type of Biopsy: Excisional Incisional Other Site: _____
CYTOLOGY: Site or type of fluid: _____
Please check if culture of the biopsy sample is desired (note that formalin-fixed tissue is not suitable for culture, unfixed tissue is required):
 Aerobic bacterial culture Susceptibility Anaerobic bacterial culture Fungal culture
Previous Accession # for this mass/lesion cytology: _____

History (Required information includes location, duration, and size of mass along with treatments used):



Indicate skin lesion site on above drawings

Treatments: _____

Treatments:

Tentative or differential diagnoses: _____

Rollins Laboratory
FedEx/UPS: 4400 Reedy Creek Rd.
Raleigh, NC 27607
US Mail: 1031 Mail Service Center
Raleigh, NC 27699-1031
Phone: (919) 733-3986
Fax: (919) 733-0454

Western Laboratory (Arden)
FedEx/UPS/US Mail:
785 Airport Rd.
Fletcher, NC 27832
Phone: (828) 684-8188
Fax: (828) 687-3574

Northwestern Laboratory
FedEx/UPS/US Mail:
1689 N. Bridge St.
Elkin, NC 28621
Phone: (336) 526-2499
Fax: (336) 526-2603

Griffin Laboratory
FedEx/UPS/US Mail:
401 Quarry Rd.
Monroe, NC 28112
Phone: (704) 289-6448
Fax: (704) 283-9660

This submission form is a legal binding contract between NCVDLS and the submitter. All fees are the responsibility of the submitter. When testing is outsourced to another diagnostic laboratory, submission information is shared with that laboratory.

Please Note: Specimens submitted for testing become the property of NCVDLS