Companion Animal Form

Veterinary Diagnostic Services
545 University Crescent, Winnipeg, Manitoba R3T 5S6
P: 204-945-8220 F: 204-948-2654 E: vetlab@gov.mb.ca



W: www.manitoba.ca/agriculture/vds

Routine Legal Rush (advanced notice and history required, fees apply)			
Rabies Suspect No Yes (no other testing to occur until rabies status determined)			
VeterinarianBilling clinic			
Additional report to (limit of one)			
Owner/Reference (max 30 characters)			
Species Breed Related case # Sample collection date			
Animal IDAged \[w \] m \[y \] WeightSex \[M \] MN \[F \] FS \[\]			
Animai ID	Agea _ w _	m	X M MIN F F5
History (include treatments, vaccines, descriptions of lesions, etc.)			
Samples submitted (indicate sam	_		
		Urine cystocentesis (#) [
Blood smears (#)			
	_	Urine catheter (#)	
Plasma (Heparin) (#) L	Cytology smears (#)	Litter box (#)	
CLINICAL PATHOLOGY	Endocrinology (cont.)	ANATOMIC PATHOLOGY	VIROLOGY
Hematology	Total T4	☐ Necropsy (gross examination)	Feline PCR
CBC (includes differential)	Free T4 (canine)	Private Cremation	Feline URT Panel
Differential only	Canine TSH	Communal Cremation	Felid herpesvirus 1
Platelet count	Thyroid Profiles	(VDS does not release animal remains)	
Reticulocyte count	#1 (T4, FT4, cTSH)	Histopathology	Chlamydophila felis
Coombs test	#2 (T4,cTSH)		Mycoplasma felis
☐ Knott's microfilaria	#3 (T4, FT4	MICROBIOLOGY	Feline panleukopenia virus
Biochemistry Complete profile	Cytology	Bacteriology	
Complete profile	Fluid cytology	Culture and sensitivity	Felli le leurei i lia vii as
Kidney panel (see manual) Hepatic panel (see manual)	(see manual)	Brucella canis IFAT	Canine PCR
Individual test (see manual)	☐ Cytology smear ☐ Urine cytology	Clostridium difficile toxin ELISA	Anaplasma phagocytophilum
manual toot (see manual)	Bone marrow (contact lab)	Clostridium perfringens toxin ELISA	Borrelia burgdorferi
Bile acids	CSF (contact lab)	Mycology	Canine distemper virus
☐ Random ☐ Fasting ☐ Post Prandial	Urine	☐ Fungal culture	Canine parvovirus
☐ Fructosamine	Routine urinalysis	Parasitology	Leptospira spp.
Phenobarbital	(includes sediment exam) Protein/Creatinine ratio	Direct exam for mites	Mycoplasma haemocanis
Endocrinology	Other		Send out: Please specify test &
ACTH stimulation test	Canine Snap 4Dx Plus	Fecal flotation	Referral Lab
Cortisol	FeLV/FIV Snap	Parasite ID	
Endogenous ACTH (canine only)	Fecal occult blood	Baermann test (lungworms)	
Low dose Dex.	Ethylene glycol		
High dose Dex.			
Progesterone			

Name of submitter (please print)

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Continued History Veterinarian **Owner** Please indicate the location of the lesion: Ventral View **Dorsal View**

Privacy Notice

By submitting this Form, the Submitter acknowledges and agrees that: (1) all information provided on this form is complete and true to the best of their knowledge; (2) if the Submitter is not the owner of the animal(s), then the Submitter is the authorized agent of the owner or has been authorized by the owner to submit this Form and the sample(s); (3) the Submitter consents to disclosures of submitted information and materials and test results to any persons or entities identified on this Form and any necessary persons and entities as required by legislation respecting reportable diseases and for the surveillance and protection of animal and human health; and (4) the Submitter has read and understands the notices on the Veterinary Diagnostic Services Laboratory (VDS) website respecting confidentiality, disclosure, privacy and ownership of submitted materials.

The personal information collected in this form is collected in accordance with the Privacy Notice on the VDS website. For more information on the Privacy Notice, please contact the Manitoba Agriculture's Access and Privacy Coordinator at 204-945-4823 or email ardfippa@gov.mb.ca.