

Veterinary Pathology Service

School of Veterinary Medicine & Science

College Road, Sutton Bonington, Leicestershire, LE12 5RA

| UK CHINA MALAYSIA | Phone: +44 (0)0781 353 7686 / E | Email: Veterinary-Pathology@nottingham.ac.uk |
|---|----------------------------------|--|
| For internal use only Accession Number: B | Date received: | Pathologist: |
| SURGICAL PATHOLOGY SUBMIS | SSION FORM | |
| Submitting Veterinary Practice: | : | |
| Clinician: | | |
| Clinic: | Address: | |
| Phone: | . Email (for invoicing): | |
| Report will be emailed to (indicate | email for report): | |
| Owner's details: | | |
| Family name: | | |
| Animal's name / ID: | Passport/micro | ochip: |
| Reference No (if any): | | |
| Travel outside the UK? Yes • No | • (must be completed for this su | ubmission to be processed) |
| (If yes) Date and place travelled t | :0: | |
| DETAILS OF SUBMISSION | | |
| Species: | Breed: | |
| Colour/markings: | | |
| Sex: Male • Female • Neur | tered • Age (years/months): | Weight (kg): |
| Date and time taken: | Anatomical loca | tion: |
| Completely removed • / Incomple | tely removed • | |
| CLINICAL HISTORY (Please inclurelevant haematology and biochem | | *Please indicate location of biopsy |
| Therapy (if any -type and duration | า-): | |
| Special concerns (requests, rule | outs, margins,): | |

I confirm that the owner/agent has given consent for material to be stored for subsequent analysis and educational and research purposes.

(more space available overleaf if needed)

Signature of submitting Vet: Date:

BIOPSIES WILL NOT BE PROCESSED WITHOUT THE SIGNATURE OF THE REFERRING VETERINARIAN

**Included with the biopsy examination fee are macroscopic and histologic examination and routine special histochemical stains. Additional testing (e.g. immunohistochemistry, whole slide scanning, in situ hybridisation, etc. among other molecular tests) may be available at external laboratories and will incur an additional cost.



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| continue here | | |
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| CLINICAL HISTORY (Please include duration of the clinical signs, relevant haematology and biochemistry, imaging (x-ray, CT,), therapy -type and duration-, special concerns): | | |
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