Comparative Pathology Lab Animal Resource Program University of Alabama at Birmingham Pathology Services Submission Form

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DATE:	SUBMITTOR:	HS ☐ DX ☐ RS☐	
CONTACT:	PHONE:	SPECIMEN COLLECTION TIME:	
INVESTIGATOR:	DEPT:	AM	
ANIMAL ID: G	ENUS & SPECIES:	STRAIN:	
AGE:	/EIGHT:	COLOR:	
BLDG: RM: CUB: ISOL:_	RACK:	NUMBER OF ANIMALS:	
VENDOR: D	ATE ANIMALS RECEIVED:		
WILL HANDLING THIS ANIMAL POTENTIALLY EXPOSE PERSONNEL TO A HAZARDOUS RESEARCH AGENT? IF YES PLEASE SPECIFY AGENT(S): ORACLE ACCOUNT NUMBER: PLEASE CHECK DESIRED TESTS (OTHER TESTS AVAILABLE UPON REQUEST) For more information about specific tests offered, select the field and press F1.			
Pinworm Assessment Diagnostic Gross Only Non-Approved Source (non-rodent) Other	HEMATOLOGY CBC Manual differential Plasma Protein Other CLINICAL CHEMISTRY Comprehensive Profile Other MICROBIOLOGY Source Aerobic Culture Site 1 Site 2 Site 3 Site 4 Antibiotic Sensitivity* Campylobacter Culture Fungal Culture Gram Stain Herpes B Viral Culture Other *Indicate specific antibiotics to be tested:	PARASITOLOGY Fecal Flotation Direct Fecal Smear Cecal Content Tape Impression Test Skin Scraping Pelt Exam Other MOLECULAR DIAGNOSTICS (PCR MHV/RCV Rodent Parvovirus Helicobacter spp. Pneumocystis carinii Other Alternatives to antibody production testing of biologicals Mouse Essential Panel Mouse Comprehensive Panel Rat Panel Individual tests OTHER DIAGNOSTICS	

COMMENTS/HISTORY/ SPECIAL INSTRUCTIONS: