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| For Lab Use Only |
| UNH No: _____ |
| Charges: _____ |
| Pathologist: _____ |



University of New Hampshire

NH Veterinary Diagnostic Laboratory

21 Botanical Lane Durham, NH 03824

PH (603) 862-2726 F (603) 862-0179 Email: nh.vdl@unh.edu

www.nhvdl.unh.edu

DERMATOPATHOLOGY SUBMISSION FORM

| | |
|---|--|
| Submitting Veterinarian: _____ Clinic/Hospital: _____ City/Town: _____ State: _____ Phone: (____) _____ Fax(____) _____ | Submission Date: _____ Results EMAILED unless otherwise indicated: <input type="checkbox"/> Mail <input type="checkbox"/> Fax <input type="checkbox"/> Email Provide email if not on file: _____ |
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| | |
|---|--|
| Owner/Animal Information | |
| Owner Name: _____ City/Town: _____ State: _____ Species: <input type="checkbox"/> Canine <input type="checkbox"/> Feline <input type="checkbox"/> Equine <input type="checkbox"/> Bovine <input type="checkbox"/> Caprine Breed: _____ | Animal ID: _____ Age: _____ <input type="checkbox"/> Yrs <input type="checkbox"/> Mos <input type="checkbox"/> Wks <input type="checkbox"/> Days <input type="checkbox"/> Fetus <input type="checkbox"/> Porcine <input type="checkbox"/> Ovine <input type="checkbox"/> Avian Other: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> MC <input type="checkbox"/> FS Color: _____ |

History—Description of lesions and relevant clinical history ***Submission of clinical photos of lesions is strongly recommended***

PLEASE CONTINUE ON BACK ***PHOTOS SHOULD BE EMAILED TO NH.VDL@UNH.EDU***

Duration: _____

Pruritus: Yes No Severity: _____

Are lesions symmetrical? Yes No

Previous skin/ear problems? Yes No

Clinical Differentials: _____

Lesion distribution and sites sampled

Ventral

Dorsal

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| | | | |
|--|---|--|---|
| Opened by: _____ <input type="checkbox"/> USPS <input type="checkbox"/> Courier <input type="checkbox"/> Drop-off Date: _____ | Condition: <input type="checkbox"/> Leaked <input type="checkbox"/> Frozen <input type="checkbox"/> Damaged <input type="checkbox"/> Cold Pack | Specimen, # of: <input type="checkbox"/> Tissue, fixed ___ <input type="checkbox"/> Tissue, Fresh ___ <input type="checkbox"/> Slides ___ <input type="checkbox"/> Other ___ | Final: <input type="checkbox"/> Faxed <input type="checkbox"/> Emailed <input type="checkbox"/> Mailed |
|--|---|--|---|

Samples submitted to the NHVDL become the property of the lab and may be used for teaching, ancillary testing, and research. Test results will be reported to appropriate state or federal agencies as required by law. The submitting veterinarian is responsible for the requested tests and communicating results with the owner.

