



OFFICE USE ONLY	
Accession # _____	
Rec'd _____	Assigned _____

166 Greene Hall
Auburn University
Auburn, AL 36849

CLINICAL PATHOLOGY

Ph: 334-844-2653
Fax: 334-844-2654

<https://www.vetmed.auburn.edu/academic-departments/dept-of-pathobiology/diagnostic-services/>

OWNER INFORMATION		
Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
County: _____		
ANIMAL NAME/ID _____		
Species _____	Breed _____	
Sex _____		
Age _____	Month _____	Year (check one) _____

CLINIC INFORMATION		
Referring Veterinarian: _____		
Clinic Name: _____		
Address: _____		
City: _____	State: _____	Zip Code: _____
LICENSE NO: _____	STATE: _____	
Phone: (____) _____	FAX: (____) _____	
Email: _____		
Fax results: _____	Yes _____	No _____

Test Requested	Please provide this information
Body Cavity Effusion	Bone Marrow Aspirate
Color: _____ Specific gravity: _____ TS: _____	Hematocrit: _____ Total WBC: _____ Platelet count or estimate: _____
Tissue Aspiration, Imprint, Scraping, Etc.	Blood Smear
Location: _____	Hematocrit: _____ Total WBC: _____ Platelet count or estimate: _____
Vaginal Cytology	Other (BAL, Joint fluid, Etc)
Approximate date of last estrus cycle: _____	

Clinical History:

Your provisional diagnosis: _____

Date Submitted: _____

SERVICE(S) REQUESTED

CHEMISTRY
BILE ACID (SINGLE TEST)
BILE ACIDS (POST)
BILE ACIDS (PRE)
ELECTROLYTES PANEL
LARGE ANIMAL CHEM PROFILE
FOOD ANIMAL CHEM PROFILE
SMALL ANIMAL CHEM PROFILE
TRIGLYCERIDE, SERUM
URINE
UR. PROT/CREATININE RATIO
URINE ANALYSIS

HEMATOLOGY
CBC-COMPL BLOOD CNT
LA CBC/FIBRINOGEN
COAGULATION
ANTI-THROMBIN III (AT3)
COAGULATION PROFILE
PT (PRO TIME)
APTT
IMMUNOLOGY
COOMBS TEST

CYTOLOGY
BLD SMEARS + COUNTS
BODY CAVITY FLUID
BONE MARROW + COUNTS
BONE MARROW ASP. EVAL
BRONCHIAL LAVAGE (BAL)
BUFFY COAT SMEAR CYT
CSF ANALYSIS
CYTOLOGY, slides only
SYNOVIAL FL. ANALYSIS
TRACHEAL WASH CYT

Submission Fees

CHEMISTRY	Price	HEMATOLOGY	Price	CYTOLOGY	Price
BILE ACID (SINGLE TEST)	\$25.00	CBC-COMPL BLOOD CT	\$28.00	BLD. SMEARS + COUNTS	\$42.00
BILE ACIDS (POST)	\$20.00	LA CBC/FIBRINOGEN	\$28.00	BODY CAVITY FLUID	\$50.00
BILE ACIDS (PRE)	\$20.00			BONE MARROW + COUNTS	\$75.00
ELECTROLYTE PANEL	\$20.00	COAGULATION		BONE MARROW ASP. EVAL.	\$55.00
LARGE ANIMAL CHEM PROFILE	\$60.00	ANTI-THROMBIN III (AT3)	\$45.00	BRONCHIAL LAVAGE (BAL)	\$40.00
FOOD ANIMAL CHEM PROFILE	\$40.00	COAGULATION PROFILE	\$120.00	BUFFY COAT SMEAR EVAL	\$40.00
SMALL ANIMAL CHEM PROFILE	\$60.00	PT	\$25.00	CSF ANALYSIS	\$55.00
TRIGLYCERIDE, SERUM	\$15.00	APTT	\$25.00	CYTOLOGY (slides only)	\$40.00
				SYNOVIAL FLUID ANALYSIS	\$50.00
URINE		IMMUNOLOGY		TRACHEAL WASH CYT	\$40.00
UR. PROTEIN/CREATININE Ratio	\$19.00	COOMBS TEST	\$40.00		
URINE ANALYSIS	\$23.00				

- SA CHEM PROFILE includes: ELECTROLYTES, ALB, T.PROT, BUN, CREAT, ALK.PHOS., ALT, AST, T.BILI, GLUCOSE, CALCIUM, PHOSPHORUS, CK, CHOLESTEROL, IRON PROFILE
- LA CHEM PROFILE includes: ELECTROLYTES, ALB, T.PROT, BUN, CREAT, AST, GGT, SDH, T.BILI, GLUCOSE, CALCIUM, MAGNESIUM, PHOSPHORUS, CK, CHOLESTEROL, IRON PROFILE
- COAGULATION PROFILE includes: PT, APTT, THROMBIN TIME, FIBRINOGEN, pFDP AND D-DIMER, AT3

Submission Requirements

- Cytology, slides only (aspirates/scrapes/imprints): Air-dried smears, limit to 10 smears per site.
- Fluid analysis, cytology (body cavity effusions, joints, trach wash, BAL, etc): Ship overnight with cold packs, not frozen.
- CSF: ship overnight in EDTA tube with cold packs, not frozen
- Bone marrow aspirate interpretation: Air-dried smears and current CBC data.
- Blood smears + counts: In EDTA whole blood tube (ship with cold packs overnight), Air-dried smears and current CBC data
- CBC analysis: EDTA whole blood tube, shipped with cold pack overnight.
- Clinical chemistry panel: Serum.
- Urinalysis: Fresh urine (ship with cold packs overnight).
- Individual chemistries: Serum.
- Coagulation profile: Citrated plasma, frozen (ship overnight).

**Please call the clinical pathology lab if you have any questions
(334)844-2623**