

## **FAVN Reissue Request Form**

Please fill out form completely. Incomplete forms will be returned to the submitter.

To verify authenticity the completed form must be submitted via the Auburn University Pathobiology Diagnostic Services Online Portal (<https://patho.vetmed.auburn.edu/>)

**\*\*\*Forms should be completed and submitted by the veterinary hospital staff, not the pet owner. Any forms not meeting the above submission criteria will be rejected. \*\*\***

Name of veterinary hospital:

Veterinary hospital phone #:

Veterinary hospital e-mail address:

Name of veterinarian:

Owner first & last name:

Pet name:

Incorrect information:

Correct information:

Accession # of completed FAVN (P# in upper right corner):

Brief physical description of pet:

Breed:

Age:

Sex:

Reason for discrepancy:

Signature of the veterinarian: \_\_\_\_\_ Date: \_\_\_\_\_  
The signature verifies accuracy of information.

A new, signed, FAVN Report Form must be submitted along with this form. Keep all the correct information the same as the original submission.

Reissue requests can only be submitted through the Pathobiology Diagnostic Services Online Portal.

All Reissue requests are completed at the discretion of the lab staff. Some discrepancies cannot be resolved using a reissue.