MOLECULAR DIAGNOSTICS DEPARTMENT OF PATHOBIOLOGY COLLEGE OF VETERINARY MEDICINE



OFFIC	E USE ONLY
Accession #	
Rec'd	Assigned

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## **MOLECULAR DIAGNOSTICS**

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Web: www.vetmed.auburn.edu/about/dept-of-pathobiology/diagnostic-services/

Name:						
			Referring Veterinarian:			
			Clinic Name:			
City:State:Zip Code:           County:           ANIMAL NAME/ID			Address:State: Zip Code: LICENSE NO: STATE:			
Species	Breed_		Phone: ()	FAX: (_	)	
Sex	Age		Email:			
			Results Notification:	Fax	Email	Phone
AMPLE TYPE	EDTA-whole blood	body fluid; specify type		other; specify		
ERVICE(S) REQU	ESTED					
ERVICE(S) REQU	ESTED					
	's from list below					
SELECT PCR	's from list below	E PCRs, RESULTS REP	ORTED WITHIN ONE WO	RKING DAY		
SELECT PCR	's from list below		ORTED WITHIN ONE WO	RKING DAY		
SELECT PCR	's from list below SENSITIVITY REAL-TIM nagocytophilum / platys	Feline				
SELECT PCR VAILABLE HIGH Anaplasma pl	's from list below SENSITIVITY REAL-TIM nagocytophilum / platys } ã/ &æ) ã	Feline Feline	Immunodeficiency Virus	mRNA	an)	
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- DO NOT FREEZE SAMPLES, SHIP REFRIGERATED OR AT AMBIENT TEMPERATURE (COURIER SERVICE PREFERRED)
- FOR HIGHEST PCR SENSITIVITY, USE PCR SAMPLE SUBMISSION KIT FOR ALL SPECIMENS (ORDER ABOVE)
- PAYMENT make checks payable to AU Molecular Diagnostics; enclose check or pay after invoice; credit card payments are available online: https://aub.ie/payinvoice