





Office use only

Date received

Submission	Form	Diagr	nostic L	aborato	ories	MM	PCR	BP	V
Date collected	Time collected	Dat	e sent	Lab cod	е				
					lı	nvoice add	dress:		
Submitting Vet:									
Email address (for results):									
Submitting vet's address:									
Cat's Protection centre code:		Animal reference no:							
Animal's name:									
Microchip no:									
Species: Feline		Breed:		A	ge:		Sex:		
Owners name:			Previous ref:			Langford vet:			
Sample sent: Please tick	and indicate qu	antity (and site	e):						
□ EDTA □ Clotted	□ Swab	Fluid	Tissue	Other					

Please note: Due to risk of zoonosis, we cannot accept diagnostic samples from patients where Brucellosis is suspected until the presence of Brucella sps are ruled out (APHA offer testing for this).

Clinical Signs; Treatment/ response; Vaccination history; Travel history

Feline Immunodeficiency virus (qPCR)

Clade A virus 0.5ml EDTA blood, turn around time 3-5 working days