Biopsy/Dermatopathology Submission Form

** ALL submitted samples become the property of TBSSDL. Some testing may be subcontracted or referred out to qualified laboratories. You will be contacted for permission if this will incur further charges. TBSSDL no longer offers cytology. Please send samples directly to Auburn CVM Clinical Pathology Service. **

<table>
<thead>
<tr>
<th>Veterinarian</th>
<th>Owner</th>
</tr>
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<tbody>
<tr>
<td>Clinic</td>
<td>County</td>
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<tr>
<td>Address</td>
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<tr>
<td>City</td>
<td>State</td>
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<td>Phone</td>
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<td>Fax</td>
<td>Email</td>
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<tr>
<td>Email</td>
<td>Previous Case #</td>
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</tbody>
</table>

Report to: □ Vet □ Own □ Other:
Bill to: □ Vet □ Own □ Other:
Report Preference: □ Email □ Fax □ Mail
Bill Preference: □ Email □ Fax □ Mail

Specimen: □ Fixed Tissue, Single □ Fixed Tissue, Multiple □ Fresh Tissue, Single □ Fresh Tissue, Multiple

Animal Name/ID | Species
Breed | Sex | Age

* Liver copper levels require submission of fresh (unfixed) liver and incur an additional cost: $10.00 *
**Completeness of excision can only be assessed for excisional biopsies (masses submitted whole) **

Location (for each tissue submitted):

Distribution (single area, trunk and tailhead, generalized etc.):

Description (crusts, pustules, invasive, pedunculated, etc.):

Duration (if known):
Additional Relevant Clinical History/Treatment:

Clinical Diagnosis/Differential: ____________________________

Print Name: ____________________________ Signature: ____________________________ Date: ____________________________

CF.ACC.12 Biopsy/Dermatopathology Submission Form 1 of 1 September 2018 JP