

**COMPARATIVE PATHOLOGY LABORATORY**  
**Research Animal Resources and Compliance, 336 Enzyme Institute**  
**1710 University Avenue, University of Wisconsin**  
**Madison, WI 53726-4087**

**Clinical Lab 608/263-6464 • Histo Lab 608/262-0933 • FAX 608/265-2698**

**RODENT**

Submission Date _____		Protocol Number _____	
<b>Direct charge number required for billing:</b> DEPT ID _____ FUND _____ PROGRAM CODE _____			
PROJECT _____ (if applicable)		Internal Work Order Number: _____ (if applicable)	
Name of departmental billing officer ( <b>required</b> ) _____			Telephone _____
Lab Animal Veterinarian _____		Investigator _____	Department _____
Contact Person _____		Dept. Address _____	
Telephone _____		Email _____	FAX _____
Species _____		Strain/Breed _____	Bio level _____
No. _____	Age _____	Sex _____	ID _____ Animal Room No. _____
Specimen Submitted: _____			
Live <input type="checkbox"/>	Dead <input type="checkbox"/>	Euthanized <input type="checkbox"/>	Method and drug used _____
Date & time of Death _____			
Experimental procedures, drugs, diet and/or transgene/mutation: _____			

**Complete background history and listing of clinical signs.** \_\_\_\_\_

**SEROLOGY** (Circle the desired test or tests.)

- \_\_\_ Mouse Clinical Panel (9 tests)  
 MHV, MVM (MMV), MPV (MPV1, MPV2, MPV3)  
 NS1, MNV, Sendai, M. pul, TMEV, EDIM
- \_\_\_ Mouse Basic Panel (13 tests)  
 Clinical Panel plus Reo 3, LCM, Ectro, PVM
- \_\_\_ Mouse Comprehensive Panel (16 tests)  
 Basic Panel plus MAD 1, MAD 2, Polyoma
- \_\_\_ Rat Clinical Panel (10 tests)  
 RCV, Sendai, PVM, Parvo (NS1), RPV, RMV, KRV,  
 H-1, M. pul, TMEV
- \_\_\_ Rat Basic Panel (12 tests)  
 Clinical Panel plus Reo 3, LCM
- \_\_\_ Rat Comprehensive Panel (16 tests)  
 Basic Panel plus MAD 1, CARB, Han, Tyzzer's
- \_\_\_ Hamster Clinical Panel (4 tests)  
 Sendai, PVM, LCM, Tyzzer's
- \_\_\_ Hamster Comprehensive Panel (7 tests)  
 Clinical Panel plus SV 5, Reo 3, E. cun
- \_\_\_ Guinea Pig Clinical Panel (4 tests)  
 Sendai, PVM, E. cun, P13
- \_\_\_ Guinea Pig Basic Panel (7 tests)  
 Clinical Panel plus SV 5, LCM, Tyzzer's
- \_\_\_ Guinea Pig Comprehensive Panel (8 tests)  
 Basic Panel plus GPCMV
- \_\_\_ PCR ASSAY  
 \_\_\_ Helicobacter PCR  
 \_\_\_ MHV  
 \_\_\_ Other \_\_\_\_\_

**BACTERIOLOGY**

- \_\_\_ Tissues desired \_\_\_\_\_
- \_\_\_ Antibiotic Susceptibility \_\_\_\_\_

**MYCOLOGY**

- \_\_\_ Tissues desired \_\_\_\_\_

**PARASITOLOGY**

- \_\_\_ External \_\_\_ Cecal \_\_\_ Fecal
- \_\_\_ Scotch tape slide (clear tape only)
- \_\_\_ Heartworm \_\_\_ (Dirochek) \_\_\_ (Capillary)

**VIROLOGY** \_\_\_\_\_ (tissue)

**SKIN EXAMINATION**

**CYTOLOGY**

- \_\_\_ **HEMATOLOGY**  
 CBC (RCB, WBC, PCV, Hb, Differential, platelets)  
 (Circle if only a single test desired.)

**CLINICAL CHEMISTRY**

- \_\_\_ Specific Test(s) \_\_\_\_\_
- \_\_\_ Small Animal Panel \_\_\_\_\_

**URINALYSIS**

**NECROPSY**

**HISTOPATHOLOGY**

- \_\_\_ (tissue) \_\_\_\_\_

**PHENOTYPING**

- \_\_\_ Target tissue or organs of special interest \_\_\_\_\_

**OTHER**

**CHARGES:**

Animal Weight \_\_\_\_\_

