

EQUINE SUBMISSION FORM

Phone: 02476 323 275

PRACTICE ADDRESS	OWNER AND ANIMAL DETAILS	LABORATORY USE ONLY
Vet Surgeon:	Owner's name:	Date received:
Practice:	Animal's name /ID:	Samples:
Address:	Practice ref:	<input type="checkbox"/> Plain <input type="checkbox"/> Urine
Postcode:	Breed:	<input type="checkbox"/> Heparin <input type="checkbox"/> Faeces
Report by:	Age:	<input type="checkbox"/> Ox-F <input type="checkbox"/> Swab
<input type="checkbox"/> Tel	Microchip number:	<input type="checkbox"/> EDTA <input type="checkbox"/> Slides
<input type="checkbox"/> Fax	Sex: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> Neutered	<input type="checkbox"/> Gel <input type="checkbox"/> Citrate
<input type="checkbox"/> Email	Date of sampling:	<input type="checkbox"/> Histo Pot <input type="checkbox"/> Other
	Previous lab ref:	<input type="checkbox"/> Haemolysis
		<input type="checkbox"/> Lipaemia
		<input type="checkbox"/> Icteric

CLINICAL HISTORY

* Please refer to the price guide for specific samples and protocols. If in doubt, please contact the laboratory.

PROFILES	ENDOCRINOLOGY continued	INFECTIOUS DISEASE - PCR PROFILES	INFECTIOUS DISEASE - PCR
<input type="checkbox"/> EQ1 Health Screen FBC, TP, Alb, Glob, Fibrinogen, Urea, Creatinine, Na, Cl, K, ALP, GGT, AST, CK, Glu	Reproduction/Sex Hormones	<input type="checkbox"/> Equine Neurology Profile SAA, West Nile Virus (IgM+IgG), TBEV (IgM+IgG), PCR tests: Bornavirus, EHV1+4	<input type="checkbox"/> ANAP Anaplasma phagocytophilum
<input type="checkbox"/> EQ2 Systemic Disease Profile FBC, TP, Alb, Glob, Fibrinogen, Urea, Creatinine, Na, Cl, K, Phos, Ca, ALP, GGT, AST, Bili, Bile acids, CK, Glu	<input type="checkbox"/> AMH Anti-Müllerian Hormone*	<input type="checkbox"/> XERL Eq Respiratory Profile - large Herpesvirus 1+4 Influenza A virus, Streptococcus equi equi / zoepidemicus	<input type="checkbox"/> BABP Babesia species
<input type="checkbox"/> PPID PPID Profile* Insulin, Glucose, Endogenous ACTH	<input type="checkbox"/> OESH Oestrone Sulphate	<input type="checkbox"/> XER2 Eq Respiratory Profile - large 2 EHV 1+4, Influenza A virus, Streptococcus equi equi, ECoV	<input type="checkbox"/> XBVE Bornavirus
<input type="checkbox"/> EMS EMS Profile* Insulin, Glucose, Triglycerides, Adiponectin	<input type="checkbox"/> PMSG PMSG	<input type="checkbox"/> XCAO Camelid Abortion PCR Profile Leptospira species, Toxoplasma gondii, Chlamydia species	<input type="checkbox"/> BORA Borrelia (Lyme disease)
<input type="checkbox"/> MINE Mineral Profile Ca, Na, Phos, Mg, Se, Zn, Cu, Mn, K, Cl, Fe	<input type="checkbox"/> TES Testosterone	<input type="checkbox"/> XEAP Equine Abortion PCR Profile EHV 1+4, EVA, Lepto spp	<input type="checkbox"/> XBP Bovine Papillomavirus (Sarcoid)
IMMUNOLOGY	Adrenal	<input type="checkbox"/> XH14 Equine Herpes Virus 1 and 4 (EHV1/4)	<input type="checkbox"/> XCVE Equine Coronavirus (ECoV)
<input type="checkbox"/> IGGC IgG assay Foal	<input type="checkbox"/> COR Cortisol	<input type="checkbox"/> XH25 Equine Herpes Virus 2 and 5 (EHV2/5)	<input type="checkbox"/> DERP Dermatophytes
<input type="checkbox"/> SPE Serum protein electrophoresis	<input type="checkbox"/> ACTH Endogenous ACTH	<input type="checkbox"/> FFFP Foal Faecal Profile (see reverse for details GE)	<input type="checkbox"/> XEVA Equine Viral Arteritis Virus (EVA)
HAEMATOLOGY	<input type="checkbox"/> PPID Eq. PPID Profile* (see profiles)	<input type="checkbox"/> XERF Foal Respiratory Profile EHV1+4, Influenza A virus, Rhodococcus equi	<input type="checkbox"/> XH03 Equine Herpes Virus 3 (EHV3)
<input type="checkbox"/> FBC1 Full Blood Count	<input type="checkbox"/> EMS EMS Profile* (see profile)		<input type="checkbox"/> XEIA Equine Influenza A Virus
<input type="checkbox"/> COO1 Coombs Test	Other		<input type="checkbox"/> XLAW Lawsonia intracellularis
<input type="checkbox"/> FILM Blood Smear Examination	<input type="checkbox"/> INS Insulin *		<input type="checkbox"/> LEPP Leptospira species
<input type="checkbox"/> FIB Fibrinogen	CLINICAL CHEMISTRY		<input type="checkbox"/> XMYH Mycoplasma haemolamae
ENDOCRINOLOGY	<input type="checkbox"/> Indiv test:		<input type="checkbox"/> XSAL Salmonella species
Thyroid	<input type="checkbox"/> COB Cobalt		<input type="checkbox"/> XSES S. equi equi (Strangles)
<input type="checkbox"/> T4 Total T4	<input type="checkbox"/> SDMA SDMA		<input type="checkbox"/> XSEE S. equi equi / zoepidemicus
	<input type="checkbox"/> SAA Serum Amyloid A		<input type="checkbox"/> XTAY Taylorella equigenitalis (CEM)
	<input type="checkbox"/> THMK Thymidine kinase		<input type="checkbox"/> XTBE Tick-borne Encephalitis Virus (TBE)
	<input type="checkbox"/> TROP Troponin I		<input type="checkbox"/> XWNV West Nile Virus
	<input type="checkbox"/> ZN Zinc		

University of Warwick Science Park, Venture Centre, Sir William Lyons Road, Coventry CV4 7EZ

Web: www.BattLab.com - Tel: 024 7632 3275 - Fax: 0871 750 5323

email: admin@BattLab.com

* please contact the lab for shipping instructions

CYTOLOGY AND HISTOLOGY

- Cytology Aspirate Impression Scraping
- Bronchoalveolar lavage/Transtracheal wash
- Cytology - other fluids and washes Specify origin: _____
- Histology
- Biopsies Specify origin: _____
- Cytology and Histology - same site

Anatomical Location of Mass/Lesion/Fluid:

Size and Description of Mass/Lesion/Fluid:

How Long Present?:

INFECTIOUS DISEASE - SEROLOGY	<input type="checkbox"/> SDOU Trypanosoma equiperdum (Dourine) <input type="checkbox"/> WNVE West Nile Virus Ab (IgM + IgG)	URINALYSIS
<input type="checkbox"/> Other: _____ <input type="checkbox"/> SANA A. phagocytophilum antibody <input type="checkbox"/> ANOP Anoplocephala IFAT <input type="checkbox"/> SBGE Babesia antibody (IFAT) <input type="checkbox"/> BABE Babesia antibody (ELISA) <input type="checkbox"/> BACF Babesia antibody (Compliment Fixation) <input type="checkbox"/> BOR Borrelia antibody IgM+IgG (IFAT) <input type="checkbox"/> SBWB Borrelia antibody (Western blot) <input type="checkbox"/> SBOR Bornavirus antibody <input type="checkbox"/> SGLA Burkholderia mallei antibody (Glanders) <input type="checkbox"/> EH14 Equine Herpes Virus 1 & 4 Ab <input type="checkbox"/> EIAC Eq Infectious Anaemia Ab (Coggins) <input type="checkbox"/> EIAE Eq. Infectious Anaemia Ab (ELISA) <input type="checkbox"/> SEVA Equine Viral Arteritis Ab <input type="checkbox"/> SEIV Influenza A Virus antibody <input type="checkbox"/> LEP Leptospira antibody <input type="checkbox"/> SLIS Listeria antibody <input type="checkbox"/> SSAE Salmonella abortus equi antibody <input type="checkbox"/> SSV Streptococcus equi antibody <input type="checkbox"/> TBEE Tick-borne Encephalitis Virus Ab (IgG) <input type="checkbox"/> TBE Tick-borne Encephalitis Virus Ab (IgM)	DRUG MONITORING & TOXICOLOGY	<input type="checkbox"/> FRAC Fractional excretion <input type="checkbox"/> UR1 Sediment, biochem, SG <input type="checkbox"/> UR3 UR1 + C&S <input type="checkbox"/> UR4 UR3 + UP:C <input type="checkbox"/> UPCR Urine Protein:Creatinine <input type="checkbox"/> CALC Calculus analysis
	MICROBIOLOGY / DERMATOLOGY	ALLERGY
	<input type="checkbox"/> CUL1 Aerobic + sensitivity <input type="checkbox"/> CUL2 Aer/anaer + sensitivity + fungi <input type="checkbox"/> DER1 Skin scraping (SS) <input type="checkbox"/> DER2 SS + Dermatophyte culture <input type="checkbox"/> DER3 SS + Fungal/bacterial C&S <input type="checkbox"/> DERP Dermatophyte PCR	<input type="checkbox"/> EALB Screening Test <input type="checkbox"/> EALS Seasonal (Outdoor) Panel <input type="checkbox"/> EALP Perennial (Indoor) Panel <input type="checkbox"/> EFHE Feathers/Hairs/Epithelia <input type="checkbox"/> EINS Insect Panel <input type="checkbox"/> EFAE Equine Food Allergens
	GASTROENTEROLOGY	GENETIC DISEASE
<input type="checkbox"/> FEP Large Faecal Profile Salmonella, Mycology, Anaerobes, Clostridium perfringens enterotoxin, Clostridium difficile toxin A & B, pH-value, Coronavirus <input type="checkbox"/> GE10 Small Faecal Profile Bacterial pathogens including Salmonella, Mycology, Endoparasites <input type="checkbox"/> FFFP Foal Faecal Profile Salmonella, Mycology, Anaerobes, pH-value, Endoparasites incl. protozoa, Rotavirus & Clostridium perfringens toxin	<input type="checkbox"/> Other: _____ <input type="checkbox"/> no code HWSD <input type="checkbox"/> PSSM PSSM-1 <input type="checkbox"/> no code WFFS <input type="checkbox"/> no code Combination Quarter Horse /Appaloosa GBED, HERDA, HYPP, PSSM	

PLEASE REFER TO THE PRICE GUIDE FOR ANY OTHER SPECIFIC TESTS / CODES AND PROVIDE THEM BELOW

By sending your sample to BattLab you are agreeing to our terms and conditions - battlab.com/terms-and-condition