

**Diagnostic Laboratory Service**

[vetmed.tennessee.edu/vmc/dls](http://vetmed.tennessee.edu/vmc/dls)

Practice:		
Veterinarian:		
Address:		
Phone:		
Fax:		
Email:		
Specimen:	Collector's Initials	
Site:	Date Collected:	Time Collected:
Patient Name:		
Owner:		
<b>Clinic Patient Chart No.:</b>		
Species: Canine Feline Equine Other: _____	Sex: Female Male	Neutered/Spayed Intact
Breed:	Age:	
Other tissues/specimens submitted to: (check all that apply)		
<input type="checkbox"/> Bacteriology/Mycology <input type="checkbox"/> Biopsy - Anatomical Pathology <input type="checkbox"/> Clinical Pathology <input type="checkbox"/> Cytology - Clinical Pathology <input type="checkbox"/> Endocrinology <input type="checkbox"/> Immunology <input type="checkbox"/> Necropsy - Anatomical Pathology <input type="checkbox"/> Parasitology <input type="checkbox"/> Virology		

**Cytology - Clinical Pathology**      **865-974-5605**

<b>For lab use only</b>	Date:	Accession #:
Number of slides:	Number of tubes:	
<b>SPECIMEN REQUIREMENTS:</b>		
CSF = Cerebrospinal Fluid	L = Lavender	R = Red Top      SL = Slide

CYTOLOGY		
<input type="checkbox"/> Bone Marrow Cytology and Report	SL+L	<input type="checkbox"/> CSF Analysis w/Cytology and Report      CSF
<input type="checkbox"/> Blood Smear Exam	SL+L	<input type="checkbox"/> Cytology Smear Evaluation & Report      SL
<input type="checkbox"/> Buffy Coat Exam	L	<input type="checkbox"/> Synovial Fluid Exam and Report      SL, L
<input type="checkbox"/> Centesis Fluid Exam and Report	L+R	

**THIS LAB ACCEPTS PRIMATE SAMPLES WITH PRIOR APPROVAL.**

**Case History:** *(history, medication, clinical signs, pertinent lab findings, tentative diagnosis)*

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**Ship Samples to:** UTCVM Clinical Pathology Laboratory  
 2407 River Drive, Room C128 | Knoxville, TN 37996-4542

☎ **865-974-5605**    📠 **865-974-5564**    ✉ [clinpath@utk.edu](mailto:clinpath@utk.edu)  
 🌐 [vetmed.tennessee.edu/vmc/dls/clinpath](http://vetmed.tennessee.edu/vmc/dls/clinpath)

For the most up-to-date test listings, lab forms, pricing, submission guidelines, and shipping instructions visit [vetmed.tennessee.edu/vmc/dls](http://vetmed.tennessee.edu/vmc/dls)

**PLEASE DO NOT WRITE BELOW THIS LINE**

**DATE COMPLETED:** \_\_\_\_\_ **PERFORMED BY:** \_\_\_\_\_