



MIDWEST VETERINARY LABORATORY

LABORATORY USE ONLY

Owner's Last Name:		Patient's First Name:	
Clinic:	Doctor:	Date of Birth:	
Species: <input type="checkbox"/> Canine <input type="checkbox"/> Feline <input type="checkbox"/> Other: _____	Sex: <input type="checkbox"/> M <input type="checkbox"/> MN <input type="checkbox"/> F <input type="checkbox"/> FS	Date & Time of Collection:	

MICROBIOLOGY

- 336** Aerobic Culture & Sensitivity
- 337** Aerobic & Anaerobic Culture & Sensitivity
- 452** Anaerobic Culture
- 650** Fecal Pathogens
- 332** Blood Culture
- 326** Urine Culture
- 334** Fungal Culture

HAS THIS PATIENT BEEN ON ANTIBIOTICS IN THE PAST TWO WEEKS? Yes No

Sample Source:

Location:

Size & Shape:

Growth Pattern:

Duration:

Rate of Growth:

History of Recurrence:

Additional History:

HISTOPATHOLOGY

- 364** Histo: 1 site
- 364A** Histo: 2 sites
- 364B** Histo: 3 sites
- 364C** Histo: 4 sites
- 364D** Histo: 5 sites
- 364E** Histo: 6 sites
- 364F** Histo: 7 sites
- 364X** Histo: Large Source
Example: Mammary mass, spleen, limb, etc.

CYTOLOGY

- 339** Cytology: FNA 1 site
- 339A** Cytology: FNA 2 sites
- 339B** Cytology: FNA 3 sites
- 339C** Cytology: Lymph Nodes (2-4 sites)
- 338** Cytology Fluid Analysis

