



Kansas State Veterinary  
DIAGNOSTIC LABORATORY

# CLINICAL IMMUNOLOGY/FLOW CYTOMETRY SUBMISSION FORM

Kansas State Veterinary Diagnostic Laboratory  
1800 Denison Avenue, Mosier D117, Manhattan, KS 66506  
Phone: (866) 512-5650 Fax: (785) 532-4835

[www.ksvdl.org](http://www.ksvdl.org)

**BILL TO:**  Clinic  Owner  Third Party Third Party to Receive Results?  Yes  No

Third Party Contact Info: \_\_\_\_\_  
\_\_\_\_\_

Laboratory Use Only  
Case Coordinator \_\_\_\_\_

Panel \_\_\_\_\_

**Please download/save and use Adobe Acrobat to complete form. Many web browsers cannot fill form fields**

Accession Number \_\_\_\_\_

**CLINIC** ACCOUNT # \_\_\_\_\_

Veterinarian \_\_\_\_\_

Clinic/Company \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

**OWNER/PRODUCER**

Owner Name \_\_\_\_\_

Business/Premise \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Fax or E-mail \_\_\_\_\_

Send Results Via: (Check all that apply)  E-Mail  Fax  Also Send Results to Owner: \_\_\_\_\_

### ANIMAL/SPECIMEN INFORMATION

Sex Codes: M = Male, MC= Castrated Male, F=Female, FS = Spayed Female Age Codes: Y =Years, M=Months, W=Weeks, D=Days

ANIMAL ID	SPECIES	BREED	SEX	AGE	DATE/TIME SAMPLE COLLECTED

Please Check Ordered Test (Sample Requirement - Species)

- Platelet Surface Associated Antibody**  
(2-3 ml whole blood in EDTA) - *Canine & Equine*  
\*We must receive PSAIg samples within 24 hours of being drawn.
- Red Blood Cell Surface Associated Antibody**  
(2-3 ml whole blood in EDTA) - *Canine & Equine*
- ANA: Anti-Nuclear Antibody Test**  
(2-3 ml of serum) - *Canine Only*
- RF: Rheumatoid Factor**  
(1-2 ml of serum) - *Canine Only*
- Canine RBC Surface Associated Antibody/ANA/RF Panel**  
(1-2 ml serum and 1-2 ml whole blood in EDTA) - *Canine Only*
- Equine Antibody to Penicillin (Equine IMHA)**  
(1-2 ml of serum) - *Equine Only*

- Immunophenotyping of Blood**  
(1-3 ml whole blood in EDTA) - *Canine, Feline & Equine*  
\*Please include concurrent CBC results
- Immunophenotyping of Bone Marrow**  
(1-3 ml bone marrow aspirate in EDTA) - *Canine, Feline & Equine*  
\*Please include concurrent CBC results
- Immunophenotyping of Fluids**  
(1 ml of pleural, peritoneal or CSF fluid) - *Canine, Feline & Equine*
- Immunophenotyping of Lymph Node**  
(minimum 2-3 needle biopsies placed in 1 ml of saline with 0.1 ml autogenous serum added) - *Canine, Feline & Equine*  
\*Please include relevant cytology results or accession number
- Immunoglobulin Quantitation Panel (IgM and IgG)**  
(1-2 ml of serum or colostrum) - *Equine Only*
- Quantitation of IgG by Radial Immunodiffusion**  
(1-2 ml of serum or colostrum) - *Equine Only*
- Quantitation of IgM by Radial Immunodiffusion**  
(1-2 ml of serum or colostrum) - *Equine Only*

### HISTORY - (required)

OPENED BY

- Courier Record:**  Courier  FedEx  Hand Delivered  Mail  UPS
- Coolant Record:**  Coolant Pack  Dry Ice  Frozen  Warmer  None
- Sample Condition:**  Good  Broken  Leaked  Other \_\_\_\_\_

This submission form is a legal binding contract between KSVDL and the submitting entity. All specimens, animals, and/or biological materials submitted to the KSVDL as well as any test results, diagnoses, or other analyses resulting from these submissions will become the property of KSVDL. Specimens also may be used for teaching purposes. All fees incurred are the responsibility of the submitting entity. A 1.5% finance charge will be assessed on all charges over 30 days.