

ORDER FORM

Canine/Feline Additional Tests

REQUIRED

Clinic Account #: _____ Collection Date: _____

Hospital/Clinic: _____ Zip Code: _____

Veterinarian: _____ Owner Last Name: _____

Animal Name: _____ Species: _____ Breed: _____

Age: _____ Sex: ☐ M ☐ M(N) ☐ F ☐ F(S) Patient ID/MRN: _____Visit www.zoetisdx.comto see our full directory
of tests or to order online.**Staff Pet:** ☐ Please check if this is for an
employee's personal pet.*

Endocrinology

- ☐ **6100 ACTH Stimulation (2 samples)** 0.5 mL serum each sample in SST or RTT. Please clearly label tubes with collection times
- ☐ **6101 ACTH Stimulation (3 samples)** 0.5 mL serum each sample in SST or RTT. Please clearly label tubes with collection times
- ☐ **6103 Dexamethasone Suppression (2 samples)** 0.5 mL serum each sample in SST or RTT. Please clearly label tubes with collection times
- ☐ **6104 Dexamethasone Suppression (3 samples)** 0.5 mL serum each sample in SST or RTT. Please clearly label tubes with collection times
- ☐ **3310 Urine Cortisol:Creatinine Ratio** 1 mL urine in WTT or sterile tube
- ☐ **6555 Malignancy (Hypercalcemia) Panel** 1 mL serum in SST or RTT **and** 0.5 mL EDTA plasma, separated. Freeze **SEPARATED** serum and plasma prior to shipping
- ☐ **6330 Free T4 by ED** 0.5 mL serum in SST or RTT
- ☐ **6306 Parathyroid Panel (PTH, Free iCa)** 1 mL serum in RTT
- ☐ **5555 Anti-Müllerian Hormone** 0.5 mL serum in RTT
- ☐ **MSUIG Insulin:Glucose Ratio** 1 mL serum in SST or RTT or 1 mL EDTA plasma, separated

Microbiology

Required: SOURCE (eg, wound, ear, ocular fluid, skin): _____

- ☐ **7156 Aerobic Culture** Culture swab or fluid/tissue in WTT or sterile tube
- ☐ **7157 Anaerobic Culture** Culture swab or fluid/tissue in WTT, anaerobic transport medium, or sterile tube
- ☐ **7135 Aerobic and Anaerobic Culture** Culture swab or fluid/tissue in WTT, anaerobic transport medium, or sterile tube
- ☐ **7140 Urine Culture and Sensitivity** 1 mL urine in WTT or sterile tube
Collection: __Cysto __Cath __Free/Void
- ☐ **7145 Fungal Culture** Culture swab, fluid, or fresh tissue in WTT or sterile tube
- ☐ **7155 Fecal Culture** 5 gm of fresh feces, submitted in a fecal tube
- ☐ **7160 Dermatophyte Culture** Hair or nail clippings, skin scrapings, culture swab, or fluid/tissue in WTT or sterile tube

Clinical Pharmacology/Toxicology

- ☐ **1025 Bromide** 1.5 mL serum in SST or RTT
- ☐ **1031 Phenobarbital** 0.5 mL serum in RTT

Serology/Infectious Disease

- ☐ **7216 Cryptococcus Antigen Titer by Latex Agglutination** 0.5 mL CSF or serum in SST or RTT
- ☐ **6129 Coccidioides Titer AGID** 1 mL serum in SST
- ☐ **BLASTANT Blastomyces Quantitative Antigen EIA** 1.2 mL serum or EDTA, heparinized or citrated plasma, separated; 0.8 mL CSF; 0.5 mL urine or BAL fluid

Serology/Infectious Disease

- ☐ **6130 Fungal Titer Panel AGID** 1 mL serum in SST
- ☐ **EXTENTICK Vector Serology Panel, Canine (NCSU)** 2 mL serum in RTT
- ☐ **7185 Tick Serology Panel** 3 mL serum in SST or RTT
- ☐ **TOXAB189 Toxoplasma gondii ELISA** 0.5 mL serum in SST or RTT or 0.25 mL CSF in LTT
- ☐ **6145 Vaccine Titer (Qualitative), Canine** 0.5 mL serum in SST or RTT
- ☐ **7200 Feline Vaccine Panel 2 (Cornell)** 1 mL serum in RTT
- ☐ **6007 Feline Heartworm Antibody** 1 mL serum in SST or RTT
- ☐ **7205E Rabies Titer for Export** 2 mL serum in RTT
- ☐ **6160 Core Vaccine Titer Panel (includes Rabies, non-export), Canine** 2 mL serum in RTT
- ☐ **6164 Leptospira MAT, 5 Serovar** 0.5 mL serum in RTT
- ☐ **LEPPCR Leptospira PCR** 1) 5 mL urine; 2) 1 mL EDTA whole blood; 3) urine **and** EDTA whole blood; 4) 1 gm tissue; 5) 1 mL ocular fluids; 6) 1 mL bacterial culture
- ☐ **6008 Leptospira Antibodies (IgM), Canine** 0.5 mL serum in SST or RTT or EDTA plasma or whole blood
- ☐ **5556 Feline Coronavirus (ELISA)** 0.5 mL serum in SST or RTT
- ☐ **CORONAIFA Feline Coronavirus (IFA)** 1 mL serum in SST or RTT
- ☐ **BRUCIFA Brucella canis (IFA)** 1 mL serum in SST or RTT
- ☐ **6021 Feline Infectious Peritonitis (FIP) M gene PCR** 1 mL EDTA whole blood, CSF, or other body fluid
- ☐ **NEUROID Neurology Infectious Disease Panel** 2 mL serum in SST
- ☐ **LYMEMPLX Lyme Multiplex Test, Canine** 2 mL serum in RTT

Individual Tests

- ☐ **IONISTAT Free (Ionized) Calcium** 1 mL heparinized whole blood or plasma
- ☐ **4101 PT & aPTT** 0.5 mL citrated plasma, separated
- ☐ **COAG ZRL Coagulation Panel I** 1 mL EDTA whole blood and 0.5 mL citrated plasma, separated
- ☐ **6542 Lymphoid Neoplasia PCR/PARR (T&B cell) from blood, fluid, cytopathology sample** may be performed on blood, bone marrow, cavity fluid, CSF, or tissue aspirate
- ☐ **FLOW Flow Cytometry** may be performed on blood, bone marrow, cavity fluid, CSF, or tissue aspirate
- ☐ **IRONPRO Iron Profile** 0.5 mL serum or heparinized plasma
- ☐ **6402 Acetylcholine Receptor Antibody/Myasthenia Gravis** 1 mL serum in RTT
- ☐ **6403 2M Antibody Masticatory Muscle Myositis** 1 mL serum in RTT
- ☐ **7032 Stone Analysis** Dry stones in sterile container with no-additive WTT/sterile tube
- ☐ **TAURWB Taurine: Whole Blood** 2 mL heparinized whole blood
- ☐ **TAURPLAS Taurine: Plasma** 1 mL separated heparinized plasma
- ☐ **ANA Anti-Nuclear Antibody (IFA)** 0.5 mL serum in SST or RTT

NOTES

Visit www.zoetisdx.com to see our full directory of tests or to order online. For questions, or to order by phone, please call 1-888-965-9652.

*Subject to program guidelines

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