



Abbey Veterinary Services

89 Queen Street • Newton Abbot
Devon • TQ12 2BG • U.K.

Tel: Newton Abbot (01626) 353598
International: + 44 1626 353598
Fax: Newton Abbot (01626) 335135
Web: www.abbeyvetservices.co.uk
e.mail: admin@abbeyvetservices.co.uk

RETURN ADDRESS (please ensure you include your address below)

PLEASE TICK TESTS REQUIRED

- | | | |
|---|---|--|
| <input type="checkbox"/> Histology | <input type="checkbox"/> Cytology | <input type="checkbox"/> Bone Marrow Smear |
| <input type="checkbox"/> Skin Scrape | <input type="checkbox"/> Cerebrospinal Fluid | <input type="checkbox"/> Calculus Analysis |
| <input type="checkbox"/> Fungal Culture | <input type="checkbox"/> Bacterial Culture | <input type="checkbox"/> Post Mortem Material |
| <input type="checkbox"/> Full Faecal Exam | <input type="checkbox"/> Full Urinalysis Exam | <input type="checkbox"/> Other Microbiology [†] |

[†]Please specify additional test(s) below

DIFFERENTIAL DIAGNOSIS

CLINICAL HISTORY

Continue overleaf if necessary

LAB REFERENCE _____
DATE RECEIVED _____

SUBMITTING VET _____
OWNER'S NAME _____
ANIMAL I.D. _____
SPECIES _____
BREED _____
AGE _____
SEX _____
No. OF PIECES SUBMITTED _____
TISSUE SUBMITTED _____
No. OF CONTAINERS _____

DISTRIBUTION OF LESIONS
(If Applicable)

VENTRAL DORSAL

ADDITIONAL IMPORTANT INFORMATION

TIME SINCE LAST HEAT _____
RECENT THERAPY _____

A LABORATORY CHARGE OF
£ : WILL BE ADDED TO
YOUR NEXT INVOICE
VAT TO BE ADDED AT CURRENT RATE