

Submission Form - Cytology

Please complete all obligatory boxes*)!

<p>*) Submitting person <i>Laboratory reports are transmitted automatically.</i></p> <p>Date:</p>	<p>*) Owner: <i>Laboratory reports are transmitted automatically.</i></p> <p>*) First and Last name</p> <p>*) Date of birth</p> <p>*) Address, Zip code, City</p> <p>.....</p> <p>*) Phone number</p> <p>*) E-Mail</p>
<p>*) Invoice recipient (if other than submitting person): <i>Invoices are transmitted automatically.</i></p> <p>*) E-Mail</p> <p style="text-align: right;">*) Signature of invoice recipient</p> <p><input type="checkbox"/> I hereby declare that the fees incurred from Clinical Pathology will be charged directly to me! *)</p> <p><input type="checkbox"/> I do not wish to receive invoices by e-mail.</p>	
<p>*) Animal</p> <p>Species: <input type="radio"/> Dog <input type="radio"/> Cat <input type="radio"/> Horse <input type="radio"/> Cattle <input type="radio"/> Domestic animal <input type="radio"/> Other:</p> <p>Breed: Name: Sex: <input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Castrated</p> <p>Age: or estimated age:</p>	
<p>*) Sample</p> <p><input type="radio"/> Blood <input type="radio"/> Plasma <input type="radio"/> Serum <input type="radio"/> Urine <input type="radio"/> CSF <input type="radio"/> Faeces <input type="radio"/> Slides</p> <p><input type="radio"/> Effusion: <input type="radio"/> Other:</p>	
<p>Anamnesis (Diagnosis, Treatment):</p>	

PRIVACY STATEMENT

Submitting person (Veterinarian, Clinic, Organisation)

- ☐ I hereby agree that the Veterinary University of Vienna processes the personal data provided for the purpose of the performance of laboratory services for the animals owned by my customers, and for the same reason, if requested, also submits these data to partner laboratories. I confirm that the data that I have provided have been consistently processed in accordance with the currently applicable version of the data protection regulations and that I am authorised to transfer the data to the Veterinary University of Vienna.

We are unable to fulfil our services offered without these data and your consent to their processing!

Submitting person (Owner)

- ☐ I hereby agree that the Veterinary University of Vienna processes the personal data provided for the purpose of the performance of laboratory services for the animal that I own, and for the same reason, if requested, also submits these data to partner laboratories.

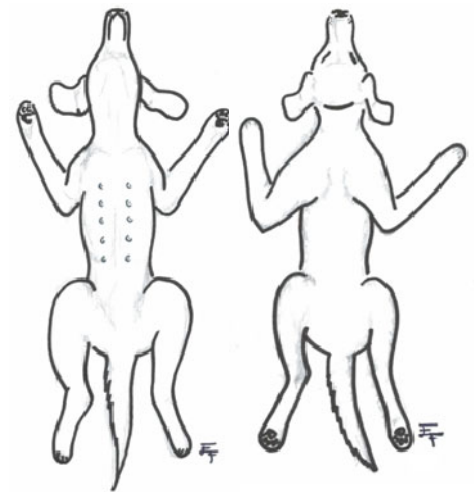
We are unable to fulfil our services offered without these data and your consent to their processing!

Cytology

<input type="radio"/> Cytology (4-6 Slides/site)	29,40 €	<input type="radio"/> CSF (cell count, if necessary cytology, pH, Blood, Pandy, Nonne Appelt, Osmolality, Gluc, TP)	41,10 €
<input type="radio"/> Effusion (Abdomen, Thorax, Pericard) (Cell count, cytology, TP, LDH)	41,10 €	<input type="radio"/> Bone Marrow	41,10 €
<input type="radio"/> Synovia (Cell count, Cytology, Mucin, Gluc, TP)	41,10 €	<input type="radio"/> Lymph Node	35,30 €
		<input type="radio"/> TBS/BAL	29,40 €

Biopsy

Specimen:	<input type="radio"/> FNAB	<input type="radio"/> Imprint	<input type="radio"/> Swab	<input type="radio"/> Blood smear
Location:			
.....				
Number of Slides:				
Gross appearance:				
Size Ø:	<input type="radio"/> <0.5cm	<input type="radio"/> 0.5-2cm	<input type="radio"/> >2cm	
Consistency:	<input type="radio"/> soft	<input type="radio"/> elastic	<input type="radio"/> solid	<input type="radio"/> hard <input type="radio"/> fluctuating
Surface:	<input type="radio"/> smooth	<input type="radio"/> uneven	<input type="radio"/> hairless	<input type="radio"/> reddened <input type="radio"/> ulcerated
Demarcation:			<input type="radio"/> good	<input type="radio"/> bad
Fixed to skin:			<input type="radio"/> yes	<input type="radio"/> no
Fixed to subcutaneous tissue:			<input type="radio"/> yes	<input type="radio"/> no
Pain:			<input type="radio"/> yes	<input type="radio"/> no
Growth rate:			<input type="radio"/> rapid	<input type="radio"/> slow <input type="radio"/> non



VENTRAL

DORSAL

Figure applies to all animal species

Special Analysis (only after advance notice by telephone)

<input type="radio"/> Flow Cytometry Dog (cat, horse)	141,20 €	Sample
<input type="radio"/> PCR for Antigen receptor rearrangement (PARR) dog/cat; Slides (stained/unstained NOT covered)	141,20 €	<input type="radio"/> FNA lymph. tissue (in PBS-Genta)
<input type="radio"/> PARR of Paraffin-embedded tissues Dog/cat; Histo-Slides	154,00 €	<input type="radio"/> EDTA-whole blood
<input type="radio"/> c-KIT somatic mutation analysis dog; slides (stained/unstained NOT coversliped)	211,70 €	<input type="radio"/> Bone Marrow in EDTA-tube
<input type="radio"/> c-KIT somatic mutation analysis of paraffin embedded tissue dog; histopathology material	223,50 €	<input type="radio"/> Effusion
<input type="radio"/> Request for Eppendorf tubes		<input type="radio"/> DNA-Extract
Eppendorf tubes with PBS-Genta can be provided for the submission of FNA lymphatic tissue.		<input type="radio"/> Slides (ONLY PARR)

ATTENTION! Sample material for flow cytometry must be received within 24 hours of collection and kept at 4°C. Samples must be submitted before 12am.