

CLINICAL HISTORY / VACCINATION HISTORY

ANIMAL IDENTIFICATION NUMBERS/EAR TAG NUMBERS TO BE LISTED BELOW: Prefix & Counter No. eg. (Q01,10001)

1	21	41	61	81
2	22	42	62	82
3	23	43	63	83
4	24	44	64	84
5	25	45	65	85
6	26	46	66	86
7	27	47	67	87
8	28	48	68	88
9	29	49	69	89
10	30	50	70	90
11	31	51	71	91
12	32	52	72	92
13	33	53	73	93
14	34	54	74	94
15	35	55	75	95
16	36	56	76	96
17	37	57	77	97
18	38	58	78	98
19	39	59	79	99
20	40	60	80	100

SUBMITTING VETERINARY CLINIC

STAMP

Name: _____

Signature: _____

Date: _____

LEGEND

 Serum collection tube	 Urine sample
 EDTA collection tube	 Impression smear
 Sodium Fluoride collection tube	
 Orange top plain tube (No additives)	
 Serum gel collection tube	

FOR OFFICE USE ONLY

Date Received: _____	Initials: _____	Samples Submitted: _____
Fridge: _____	Freezer: _____	Results issued: _____
		Date Discarded: _____