STONE SAMPLE SUBMISSION FORM
G.V. Ling Urinary Stone Analysis Laboratory

If you prefer to submit this information online, please visit our website: http://www.vetmed.ucdavis.edu/usal/index.cfm and then go to Services for Veterinarians link for more detail regarding online submission. A blank form can also be downloaded from the site.

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Fill out the form completely (Q1 through Q9) and send stones to the mailing address shown above.

Q1. Diagnostic you request (Check either one)
   (___) Crystallographic Analysis ($75.00)
   (___) Crystallographic Analysis with Bacterial Culture ($140.00)

Q2. Referring Veterinarian
   Doctor's Name:
   Hospital Name:
   Street Address:
   City / State / Zip:
   Phone number:

How would you like to receive “Analysis Report”? (Check either one)

   (___) Fax ⇒ Number:

   (___) E-mail ⇒ E-mail Address:

Q3. Patient Information
   Owner’s Name: ____________________________
   Patient’s Name: ____________________________

Breed (Specify for appropriate species)
   Canine ⇒ (___) Mix; Other:
   Feline ⇒ (___) DSH; (___) DMH; (___) DLH; Other:
   Other (Specify species and, if possible, breed):

Gender:              Birth year (yyyy)  Weight:              GO TO Q4
   (___) M; (___) F  (___) kg  (___) lbs
   (___) MC; (___) FS

Q4. Collection Method (Check one)
   (___) Surgery
   (___) Voiding urohydropropulsion
   (___) Voided Spontaneously
   (___) Laser Lithotripsy
   (___) Other (Specify):

Q5. Location of Urolith (Check all that apply)
   (___) R-kidney (___) L-kidney
   (___) R-ureter (___) L-ureter
   (___) Bladder (___) Urethra
   (___) Urine (___) Urethral Plug
   (___) Other (Specify):

Q6. Has this patient had previous calculi?
   (___) No / (___) Unknown
   (___) Yes ⇒ Composition & when:

Q7. Has the urine been cultured?
   (___) Yes ⇒ Date       
   (___) No

If yes, what are the results?
   (___) Still pending
   (___) Negative
   (___) Positive ⇒ Type of bacteria isolated:

Q8. Current Medications:
   Drug (example: Allopurinol) / Dose (example: 15mg/kg BID) / Duration (example: 3 months)
   1. ____________________________
   2. ____________________________
   3. ____________________________

Q9. Diet:
   Brand, Type etc.
   Canned or Dry
   Duration pet has been fed diet
   1. ____________________________
      (___) Canned (___) Dry
   2. ____________________________
      (___) Canned (___) Dry
   3. ____________________________
      (___) Canned (___) Dry

We sincerely appreciate your support of our laboratory. These data are used to help provide updated management protocols. If you have any questions or request, do not hesitate to contact us. (Last Update: 07/05/2015) [_____] Check here if you need more mailers.