| Office Use Only | | | |
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Orthopedic Foundation for Animals 2300 E Nifong Blvd, Columbia, MO 65201-3856 Phone: (573) 442-0418; Fax: (573)875-5073

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Office Use Only

Application for Thyroid Database

| Previous application number (if any) | Registration number 🔲 AKC 🔲 | CKC Other | |
|--|---|---|---|
| Registered name | Sex Co | lor | |
| Breed | Date of birth (month-day-year) | | |
| D number (if any)* | Registration number of sire | Registration nu | mber of dam |
| Owner name | Date of current evaluation (month-day- | year) | |
| Co-owner name | Veterinarian's name or veterinary hospital | | |
| Mailing address | Mailing address | | |
| City State/province Zip/postal code | City | State/province | Zip/postal code |
| Phone E-mail | Phone Ema | iil | |
| I hereby certify that the test submitted is of the animal described on this application. I understand that only non below which permits the OFA to release abnormal results to the public. Signature of owner or authorized representative | nui resuns win ve reieuseu to the puviic uniess th | е ппишъ от и теузлетей омпет ирре | ur in the duthonzution box |
| I hereby authorize the OFA to release the results of its evaluation of the anima(initials of registered owner). | | he public if the results are | |
| | Reference Labora See back for current | • | |
| Please complete, sign, and include this application with the sample and form requested by the reference laboratory. A check to OFA for \$15.00 should be stapled to this application. The laboratory fee is a separate charge and is determined by the laboratory. The sample, application form, and fee | See back for current Please complete, sign, a for Animals, 2300 E Nifo along with laboratory Based on the results of t | t laboratories ava and return to Orthop ong Blvd, Columbia, I results. he thyroid profile wh | ilable redic Foundation MO 65201-3856, nich included free |
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Veterinary Instructions for Submission

- 1. The veterinarian or owner must obtain the "Application for Thyroid Database" from the Orthopedic Foundation for Animals, Inc. (phone 573-442-0418), or online at www.offa.org.
- 2. The veterinarian and owner must complete their respective portions of the form.
- 3. Two milliliters (2 ml) of serum are needed for testing, and the serum sample must be from freshly collected blood. Use a plain "red-top" tube for blood collection. Do not use a serum separator tube with clot additives or any other type of plasma collection tube. After collection, place the blood sample in the refrigerator for 60 to 90 minutes to allow clotting. Centrifuge, collect the serum, and transfer to a plain plastic or glass tube suitable for shipping. Clearly label the sample with the owner's name, animal's identification, date of blood collection, and "OFA Thyroid Panel." If the specimen is to be stored for more than 12 hours prior to shipping, frozen storage is recommended.
- 4. Ship to the approved laboratory of choice via an overnight courier service. It is recommended that all specimens be packaged properly and shipped so they are received either chilled or frozen. Serum samples arriving unchilled or at room temperature within 48 hours of the collection date will be accepted. However, samples arriving after this time must be received either chilled or frozen in order to be accepted for registry testing. Contact the laboratory for further information as necessary.
- 5. Female dogs should not be tested during an estrus cycle. The date of last routine vaccination should be noted.
- 6. Please do not submit whole blood, clotted blood, or plasma.
- 7. Severely lipemic or hemolyzed specimens are also unacceptable.
- 8. Test results will be mailed or faxed only to the submitting veterinarian and the Orthopedic Foundation for Animals, Inc.. Results will not be available from the laboratory by telephone. The OFA will send a report to the owner.

Thyroid Labs

The approved laboratory must be contacted for the appropriate submission forms, sample handling procedures, and laboratory service fee *before collecting the sample*. Currently, samples may be submitted to:

Endocrine Diagnostic Center, Diagnostic Center for Population & Animal Health 4125 Beaumont Road, Room 122, Lansing, MI 48910, (517) 353-0621

Animal Health Laboratory, Laboratory Services Division, University of Guelph, Door P2 Bldg. 49, McIntosh Lane, Guelph, Ontario, N1G 2W1, CANADA, (519) 824-4120 ext. 54501

University of California Veterinary Medical Teaching Hospital, Clinical Pathology, Chemistry, Room 1017, 1 Garrod Drive, Davis, CA 95616, (530) 752-7380

Vita-Tech, 1345 Denison Street, Markham, Ont L3R 5V2, CANADA, 1-800-667-3411

New York State Animal Health Diagnostic Center, College of Veterinary Medicine, Cornell University, Upper Tower Rd., Ithaca, NY 14853, (607) 253-3673

Veterinary Diagnostic Laboratory, Attn: OFA Special Handling, College of Veterinary Medicine, University of Minnesota, 1333 Gortner Ave, St. Paul, MN 55108, (612) 624-0761

Texas Veterinary Medical Diagnostic Laboratory, 1 Sippel Road, College Station, TX 77843, (979) 845-3414

Antech Diagnostics, 1111 Marcus Ave., Suite M28, Lake Success, NY 11042, 800-872-1001. (Only the Lake Success, NY location of Antech has been certified to process OFA thyroid panels.)

Note: Please contact the laboratory for information about sample collection and submission. Include OFA form and fee with submission and the lab will forward results to OFA.

Indices of thyroiditis:

- a. Free T4 (FT4)—this procedure is considered to be the "gold standard" for assessment of the thyroid's production and cellular availability of thyroxine. FT4 concentration is expected to be decreased in dogs with thyroid dysfunction due to autoimmune thyroiditis.
- b. Canine Thyroid Stimulating Hormone (cTSH)—This procedure helps determine the site of the lesion in cases of hypothyroid-ism. In autoimmune thyroiditis the lesion is at the level of the thyroid and the pituitary gland functions normally. The cTSH concentration is expected to be abnormally elevated in dogs with thyroid atrophy from autoimmune thyroiditis.

Certification

a. Normal

FT4 Within normal range cTSH Within normal range

TgAA Negative

b. Positive autoimmune thyroiditis

FT4 Less than normal range cTSH Greater than normal range

TgAA Positive

c. Positive compensative autoimmune thyroiditis

FT4 Within normal range

cTSH Greater than normal range or

Equal to normal range

TgAA Positive

d. Idiopathically reduced thyroid function

FT4D Less than normal range cTSH Greater than normal range

e. All other results are considered equivocal