

Clinical Diagnostic Laboratory Equine Blood Typing & Antibody Screen Submission Form

All fields of this form are required, unless otherwise indicated. Submit form along with laboratory samples. Ship samples FedEx
overnight, Monday-Thursday only. Check our website for most up-to-date information, including turnaround times and shipping conditions. www.vetmed.ucdavis.edu/hospital/support-services/lab-services/clinical-laboratory-services

UC Davis VMTH, Central Laboratory Receiving Attn: Hematology, Room 1033, 1 Garrod Drive, Davis, CA 95616 (530) 752-VMTH (8684), fax (530) 752-5055, UCDVetClinicalLabs@ucdavis.edu

Billing Information

Owner or Clinic Name			Phone	Phone				
Billing Address	Email	Email						
Veterinarian	Fax							
VMTH Client ID (if known)	Results reporting methodemail fax							
Laboratory Testing Information								
Date samples collected	Additional comments							
Test type requested S Blood typing 5 Antibody screen* 2 Y N Stallion's blood includ * For NI screens: test results ** NI antibody scre	For test questions, please call (530) 752-1303							
Patient Information			NI Antibody Screen				Donor	
Horse ID	Breed	Sex	Expected or confirmed foaling date*	Previous confirmed NI?	Mare bred to donkey?	Mare/Stallion Compatibility?	Testing for potential donor?	
		M S G		Yes No	Yes	Yes No	Yes	
		M S G		Yes No	Yes	Yes	Yes No	
		M S G		Yes No	Yes	Yes	Yes No	
		M S G		Yes No	Yes	Yes	Yes No	
		M S G		Yes No	Yes	Yes	Yes	
		M S G		Yes No	Yes	Yes	Yes	