

CANINE TESTOSTERONE ANALYSIS FORM

IDEXX - PLEASE ENSURE CASES ARE REGISTERED TO VIRBAC (VBC)

1. PET OWNER DETAILS

OWNER NAME	
PHONE	
EMAIL	

2. CLINIC DETAILS

VET NAME	
PRACTICE NAME	
PHONE	
EMAIL	

3. PET INFORMATION

NAME			
MICROCHIP NO.		BREED	
AGE		DATE OF SUPRELORIN [®] 4.7 mg IMPLANT	
CLINICAL HISTORY AND OBSERVATIONS (INCLUDE REASON FOR SUPRELORIN USE)			

4. HORMONE TESTS

DATE COLLECTED		SAMPLE SUBMITTED*	<input type="radio"/> SERUM (RED TOP)
TEST CODE	<input type="radio"/> TEST - CANINE TESTOSTERONE		

*Serum should be separated from red blood cells. Samples must be kept chilled and can be frozen if it will not reach the laboratory within 1 - 2 days.

Submit samples to either:
IDEXX Laboratory: Hamilton
20A Maui Street, Pukete,
Hamilton 3200

Or
IDEXX Laboratory: Palmerston North
SOVS Complex
NZ Massey University Tennent Drive
Palmerston North 4440

For technical assistance from IDEXX please phone 0800-838-522

nz.virbac.com/suprelorin