



INDEPENDENT  
VETERINARY  
PATHOLOGY

Australian Veterinary Association  
**VetEd**  
Professional development  
for Australia's veterinarians

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☐ URGENT  
☐ MARGINS

Owner's Surname: .....

Species: .....

Breed: .....

Clinic Details: .....

Address: .....

Vet Surname: ..... First Name: .....

AVA Number: ..... ☐ Tick for VetEd

Visit Number: .....

Copy Results To: .....

Clinic: .....

Address: .....

Specimen: ..... of ..... Please Select

Specimen Site: ..... Fixed/Fresh

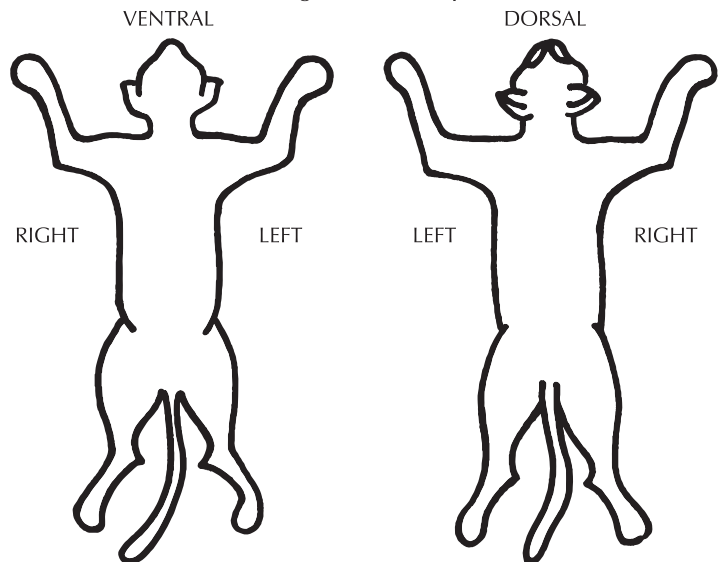
Clinical History:

Animal's Name: .....

Age: .....

Sex: ..... Desexed: .....

Please indicate on diagram where specimen was taken



Gross Specimen Description and Size:

Cytology Findings: .

Differential Diagnosis:

Vet Signature: ..... Date: .....

|                         |                          |
|-------------------------|--------------------------|
| Histology               | Biopsy - 1 <sup>st</sup> |
| Biopsy -2 <sup>nd</sup> | Biopsy - 3 <sup>rd</sup> |
| Necropsy                | Cytology                 |
| Other:                  |                          |

|                 |                     |
|-----------------|---------------------|
| Lab Use Only    | Billing Code        |
| Collection Date | Specimens Collected |
| Collection Time | Collected By        |
| Received Date   | Specimens Received  |
| Received Time   | Received By         |