

Histology

Biopsy -2nd

Necropsy

Other:

Biopsy - 1st

Biopsy – 3rd

Cytology



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URGENT
MARGINS

Billing Code

Collected By

Received By

Specimens Collected

Specimens Received

Owner's Surname:	Animal's Name:	
Species: Breed:	Age:	Desexed:
Clinic Details: Address: Vet Surname: AVA Number: Tick for VetEd Visit Number: Copy Results To: Clinic:		where specimen was taken DORSAL LEFT RIGHT
Address: Specimen: of Please Select Fixed/Fresh Clinical History:		
Gross Specimen Description and Size:		
Cytology Findings:		
Differential Diagnosis:		
Vet Signature:	Date:	

Lab Use Only

Collection Date

Collection Time

Received Date

Received Time