Pregnancy Testing Accession Form (use general UVDL accession form for other testing requests)

UTAH VETERINARY DIAGNOSTIC LABORATORY
Utah State University &
Utah Department of Agriculture and Food

Main Laboratory
Phone: (435) 797-1895
FAX: (435) 797-2805
E-mail: uvdl@cc.usu.edu
Web site: www.usu.edu/uvdl

Mail
PO Box 6338
Logan, UT 84341

UPS/FedEx/Drop off
950 E 1400 N
Logan, UT 84341

Laboratory use only

Accession Number:_____
Case Coordinator:_____
Courier:_____
Date received:_____
Accessioned By:_____
Account Name:_____
Amount: _____
Date Paid: _____

Results to be sent to: ☐Veterinarian ☐Owner
Person to be billed: ☐Veterinarian ☐Owner

Results by: ☐Mail ☐Email

Species: _____ Breed: _____

Veterinarian _____
Clinic _____
Address _____
City _____ State __ Zip _____
Phone (_____) _____
Fax (_____) _____
E-Mail Address _____

Owner _____
Business_____
Address _____
City _____ State __ Zip_____
Phone (_____) _____
Fax (_____) _____
E-Mail Address _____

Tube #	Animal ID	Days Bred	Tube #	Animal ID	Days Bred	Tube #	Animal ID	Days Bred	Tube #	Animal ID	Days Bred
1			26			51			76		
2			27			52			77		
3			28			53			78		
4			29			54			79		
5			30			55			80		
6			31			56			81		
7			32			57			82		
8			33			58			83		
9			34			59			84		
10			35			60			85		
11			36			61			86		
12			37			62			87		
13			38			63			88		
14			39			64			89		
15			40			65			90		
16			41			66			91		
17			42			67			92		
18			43			68			93		
19			44			69			94		
20			45			70			95		
21			46			71			96		
22			47			72			97		
23			48			73			98		
24			49			74			99		
25			50			75			100		

Submitted By: _____

Accession verified by:
Initials: _____
Date: _____

11/12/15

Accession verified by:
Initials: _____
Date: _____