



Clinical Flow Cytometry Service

Jaime Tarigo, DVM, PhD, Dipl. ACVP

T: 706-542-9430, email: tarigouga@gmail.com

Canine & Feline Clinical Flow Cytometry Submission Form

Form with two columns: Clinic Information and Patient Information. Includes fields for clinician, clinic, address, city, state, zip, phone, fax, email, animal name, date, owner name, breed, and gender.

Send Report to: _____ fax (and/or) _____ email _____

Pertinent Patient History section with a table for clinical signs and symptoms. Includes instructions to include a copy of all cytology and histology reports.

Sample Information section with two tables for sample collection and testing. Includes instructions regarding CBC reports and sample preparation.

Please ship overnight to the Athens Veterinary Diagnostic Laboratory. Keep sample cold (do not freeze) w/ice pack for next-morning delivery OR include ice pack w/sample for courier pick-up where available.

Questions and general information contact:

Jaime Tarigo, DVM, PhD, Dipl ACVP: email tarigouga@gmail.com, (706)542-9430, alt (706)542-5161.

Please notify us by email prior to shipping a sample.