

Case Log Number: B -		GROUP B -- Case Log		microbiology / parasitology / coprology
Name of Candidate:		Patient ID:	Collection date and Time:	Run date and Time:
Species:	Sex:	Test(s) requested:	Testing method Instrument used: Manual Automated (specify) _____	
Breed:	Age:			
Sample submitted:	Sample quality:	Additional comments / observations:		
Preliminary diagnosis:		Brief explanation of results:		

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