

Case Log Number: C -		GROUP C -- Case Log		acid-base evaluations / serology / immunology / toxicology / misc. tests
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:		

Case Log Number: C -		GROUP C -- Case Log		acid-base evaluations / serology / immunology / toxicology / misc. tests
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:		